

June 23, 2017

Ms. Marlene H. Dortch Secretary Federal Communications Commission 445 12<sup>th</sup> Street. SW Room TW-A325 Washington, DC 20554

Re: WC Docket No. 10-90, 11-42, 14-58: Form 481 - Annual Reporting Requirements for High-Cost and Low Income Recipients

Pursuant to Section 54.313 and 54.422 of the Federal Communications Commission's Rules, enclosed is a redacted version of the Form 481 of Ace Telephone Company of Michigan, Inc., Study Area Codes 310704, 310777, 310669, 310692. Ace Telephone Company of Michigan, Inc. is a state-designated ETC, and as such, is submitting to the Commission information from FCC Form 481. This filing contains public information.

A confidential "trade secret" filing pursuant to 47 C.F.R. §0.459 – Requests that materials or information submitted to the Commission be withheld from public inspection and pursuant to the Commission's March 22, 2016 DA 16-296 was also made under the Docket 10-90, 11-42 and 14.58.

Should you have any questions, please contact me via e-mail at <a href="mailto:csweet@acentek.net">csweet@acentek.net</a> or by phone at 507/896-6211.

Sincerely,

Cynthia Sweet Controller

**Enclosures** 

CC For	rm 481 - Carrier Annual Repor <b>REDACTED -</b> Data Collection Form	FOR PUBLIC INSPECTION	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310704	
<015>	Study Area Name	ACE TEL OF MICHIGAN	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Cynthia Sweet	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	csweet@acentek.net	
	Form Type	54.313 and 54.422	

FCC Form 481

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(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OM8 Control No. 3060-0819
	July 2013

<010>	Study Area Code	310704
<015>	Study Area Name	ACE TEL OF MICHIGAN
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Ca West@acentek.net

<210> For the prior calendar year, were there any reportable voice service outages?

_	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>&gt;</h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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	fulfilled Service Request lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		310704	
<015>	Study Area Name		ACE TEL OF MICHIGAN	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact rega	rding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person in	dentified in data line <030>	5078966211 ext	
<039>	Contact Email Address - Email Address of person i	dentified in data line <030>	csweet@acentek.net	
<300> U	Infulfilled service request (voice)		0	
<310> (	Detail on attempts (voice)			
		Nam	e of Attached Document	
<320>	Unfulfilled service request (broadband)		0	
<330>	Detail on attempts (broadband)			
•			Name of Attached Document	

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code
<015>	Study Area Name ACE TEL OF MICHIGAN
<020>	Program Year
<030>	Contact Name - Person USAC should contact regarding this data
<035>	Contact Telephone Number - Number of person identified in data line <030> 5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line contact Email Address - Email Address of person identified in data line contact Email Address - Email Address of person identified in data line contact Email Address - Email Address of person identified in data line contact Email Address - Email Address of person identified in data line contact Email Address - Email Address of person identified in data line contact Email Address - Email Address of person identified in data line contact Email Address - Email Address of person identified in data line contact Email Address - Email Address of person identified in data line contact Email Address - Email Address
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior offered only fixed voice calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<410>	Complaints per 1000 customers for fixed voice 0.0
<420>	Complaints per 1000 customers for mobile voice
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<440>	Complaints per 1000 customers for fixed broadband 0.0
<450>	Complaints per 1000 customers for mobile broadband

500) Con	npliance With Service Quality Standards and Consumer Protection Rules		FCC Form 481			
ata Coll	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013			
<010>	Study Area Code	310704				
<015>	Study Area Name	ACE TEL OF MICHIGAN				
<020>	Program Year	2018				
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Swent				
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.				
<039>	Contact Email Address - Email Address of person Identified In data line <030>	c=weet@acentek.net				
<500>	Certify compliance with applicable service quality standards and consumer pro	etection rules Yes				
		310704MI510 pdf				
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	les Compliance				
-515\ A	Certify compliance with applicable minimum service standards					

(600) Functionality in Emergency Situations
Data Collection Form REDACTED - FOR PUBLIC INSPECTIONS Control No. 3060-0986/OMB Control No. 3060-0819

<010>	Study Area Code	310704	
<015>	Study Area Name	ACR TEL OF M.CH.GAN	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Swaat	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 axt	
<039>	Contact Email Address - Email Address of person identified in data line <030>	cewest@acentak.no:	
<600>	Certify compliance regarding ability to function in emergency situations	Yes	
<610>	Descriptive document for Functionality in Emergency Situations	310704MI610.pdf	

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	ice Offerings including Voice Rate Data Ilection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310704	
<015>	Study Area Name	ACE TEL OF MICHIGAN	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data	line <030> 5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data	line <030> csweet@acentek.net	
	Residential Local Service Charge Effective Date  1/1/2017  Single State-wide Residential Local Service Charge		

<b>41</b>	QD .	<a3></a3>	<b>41&gt;</b>	\$2	<b>d3&gt;</b>	<b4></b4>	cbS>	0
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
				Soo at	tached worksheet			
					tached worksheet			
		i						ì

(710) Broadbrand Price Offerings Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	310704	
<015> Study Area Name	ACE TEL OF MICHIGAN	The state of the s
<020> Program Year	2018	
<030> Contact Name - Person USAC should cont	act regarding this data Cynthia Sweet	
<035> Contact Telephone Number - Number of	person identified in data line <030> 5078966211 ext.	
<039> Contact Email Address - Email Address of	person identified in data line <030>caveet@acentek_net	

250	<a></a>	<a2></a2>	<b1></b1>	<b2></b2>	<b>(0)</b>	<d1></d1>	<d2></d2>	cd3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
$\vdash$				<u> </u>					
-						<u> </u>		<del></del> -	
				See attac	hed				
-				worksheet -					
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	erating Companies lection Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-081 July 2013
<010>	Study Area Code		310704		
<015>	Study Area Name		ACE TEL OF MI	CATCON	The state of the s
<020>	Program Year		2018	CHIGAN	
<030>	Contact Name - Person	USAC should contact regarding this data	Cynthia Sweet		
<035>		nber - Number of person identified in data line <030>	5078966211 ex		
<039>		Email Address of person identified in data line <030>	csweet@acente	sk.net	
<810>	Reporting Carrier	Ace Telephone Company of Michigan, Inc			4
<811>	Holding Company	Ace Telephone Association			
<812>	Operating Company	Ace Telephone Company of Michigan, Inc			
<813>		(al)		<a2></a2>	<a3></a3>
		Affiliates		SAC	Doing Business As Company or Brand Designation
•			- See alla	ached worksh	#EL
-					
) <del>.</del>					
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<u>:</u>		· · · · · · · · · · · · · · · · · · ·			
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	ibal Lands Reporting Election Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310704	
<015>	Study Area Name	ACE TEL OF MICHIGAN	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net	
<900>	Does the filing entity offer tribal land services? (Y/N)	No	
<910>	Tribal Land(s) on which ETC Serves		
<920>	Tribal Government Engagement Obligation	Name of Attache	id Document
f vour c	ompany serves Tribal lands, please select (Yes, No, NA) for each these boxes		
	rm the status described on the attached PDF, on line 920,		
	trates coordination with the Tribal government pursuant to	Select	
	B(a)(9) includes:	Yes or No or	
921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	Not Applicable	
922>	Feasibility and sustainability planning;		
923>	Marketing services in a culturally sensitive manner;		
924>	Compliance with Rights of way processes		
925>	Compliance with Land Use permitting requirements		
926>	Compliance with Facilities Siting rules		
927>	Compliance with Environmental Review processes		
928>	Compliance with Cultural Preservation review processes		
929>	Compliance with Tribal Business and Licensing requirements.		

			Page
1000) Voice and Broadband Service Rate Comparability Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2013
<010>	Study Area Code		310704
<015>	Study Area Name		ACE TEL OF MICHIGAN
<020>	Program Year		2018
<030>	Contact Name - Person USAC should contact regarding this data		Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data lir	ne <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ne <030>	csweet@acentek.net
<1000> <1010>	Voice services rate comparability certification  Attach detailed description for voice services rate	Yes	04MI1010.pdf
	comparability compliance		Name of Attached Document
<1020>	Broadband comparability certification	Yes the	- Pricing is no more than the most recent applicable benchmark announced Nureline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	310704	4MI1030.pdf
			Name of Attached Document

(1100) No Terrestrial Backhaul Reporting		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	310704	
<015> Study Area Name	ACE TEL OF MICHIGAN	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035> Contact Telephone Number - Number of person identified in data line <030.	> 5078966211 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030	> csweet@acentek.net	
<1100> Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 2 upstream within the supported area pursuant to § 54.313(g).	<b>I</b>	
		¥

(1200) Terms and Condition for Lifeline Custon Lifeline Data Collection Form	mers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code			
<015> Study Area Name		310704	
<020> Program Year		ACE TEL OF MICHIGAN	
<030> Contact Name - Person USAC should co	ntact regarding this data	2018	
<035> Contact Telephone Number - Number o		Cynthia Sweet  > 5078966211 ext.	
<039> Contact Email Address - Email Address of			
<1210> Terms & Conditions of Voice Telephony	Lifeline Plans	310704MI1210.pdf	
			Name of Attached Document
<1220> Link to Public Website	нттр		Name of Account of Section 1
"Please check these boxes below to confirm that the at or the website listed, on line 1220, contains the require § 54.422(a)(2) annual reporting for ETCs receiving low- annually report:	ed information pursuant to income support, carriers must		
<1221> Information describing the terms and co telephony service plans offered to Lifeli	onditions of any voice ✓ ne subscribers,		
<1222> Details on the number of minutes provide	ded as part of the plan,		
<1223> Additional charges for toll calls, and rate:	s for each such plan.		

TO THE PERSON NAMED OF	e Cap Carrier Additional Documentation			FCC Form 481
Data Collec				OMB Control No. 3060-0986/OMB Control No. 3060-0819
Including Ro	ate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			July 2013
_<010> S	study Area Code	310704		
	tudy Area Name	ACE TEL OF MICHIGAN		
	Program Year	2018		
	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet		
	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.		
<039> C	Contact Email Address - Email Address of person identified in data line <030>	Csweet@acentek.net		
Select the reduction	appropriate responses below (Yes, No, Not Applicable) to no s, and Connect America Phase II support as set forth in 47 CFI	ite compliance as a recipie	ent of Incremental High Cost support, Hi	gh Cost support to offset access charge
	ental Connect America Phase I reporting			the decements strateful below is decemble.
	•			
<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Not	a that for the		
120117	July 2017 certification, this applies to Round 2 recip			
		ents or		
	Incremental Support.			
<2022>	Recipient certifies, representing year three after filir			
	acceptance of funding pursuant to 54.312(c), that the	ne locations in		
	question are not receiving support under the Broad			
	Program or the Broadband Technology Opportunitie			
	projects that will provide broadband with speeds of	at least 4		
	Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients of	•		
<2023>	The attachment on line 2024 includes a statement of	of the total amount of		
	capital funding expended in the previous year in me	eting Connect		
	America Phase I deployment obligations, accompan			
	census blocks indicating where funding was spent.			
	year three - 54.313(b)(2)(ii). Round 2 recipients only	1:		
<2024A>	Round 2 Recipient of Incremental Support?			
			•	
-2024D-	Associate the second and the second			
<2024B>	8	, was spent in year	Name of Attached Document List	ng
	three - 54,313(b)(2)(ii). Round 2 recipients only.		Required Information	
<2025A>	Round 2 Recipient of Incremental Support?			
				f <del></del>
.20055	Associate the state of the state of			
<2025B>		reports (Round 2 for	Name of Attached Document List	ng
	year three) - Connect America Fund , WC Docket 10-	90, Report and	Required Information	
	Order, FCC 13-73, paragraph 35 (May 22, 2013)	•	·	1
	. , , , , , , , , , , , , , , , , , , ,			
.2045	2045 16			
<2015>	2016 and future Frozen Support Certification 47 CFR	§ 54.313(c)(4)		

Data Collection I	Carrier Additional Documentation Form -Return Corriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control   - July 2013	No. 3060-0986/OMB Control No. 3060-0819
ncidaling Nate-of	-return curriers affiliated with Price Cap Local Exchange Carriers	July 2013	
Price Ca	p Carrier Connect America ICC Support {47 CFR § 54.313(d)}	9	
<2016>	Certification support used to build broadband		
Connect	America Phase II Reporting {47 CFR § 54.313(e)}		
<2017A>	Connect America Fund Phase II recipient?		
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for		
	capital expenditures in 2016.		
<2018>	Attach the number, names, and addresses of community anchor		
	institutions to which the carrier newly began providing access to	Name of Attached Document Listing	
	broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Required Information	
<2019>	Recipient certifies that it bid on category one telecommunications and		
	Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and		
	libraries universal service support program for eligible schools and		
	libraries located within any area in a census block where the carrier is		
	receiving Phase II model-based support, and that such bids were at rates		
	reasonably comparable to rates charged to eligible schools and libraries in		
	urhan areas for comparable offerings - 54 313/e)/1\/ii)/C\		

**Data Collection Form** 

FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	310704
<015>	Study Area Name	ACE TEL OF MICHIGAN
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)		
(3010A)	Certification of Public Interest Obligations (47 CFR §	Yes - Attach Certificat	tion
(3010B)	54.313(f)(1)(i)) Please Provide Attachment	Name of Attached Document Listing Required	310704MI3010.pdf
(3012A)	Community Anchor Institutions {47 CFR §	Information No - No New Community Anchors	
(3012B)	54.313(f)(1)(ii)) Please Provide Attachment	Name of Attached Document Listing Required	
(3013)	Is your company a Privately Held ROR Carrier (47 CFR	Information (Yes/No)	
(3014)	§ 54.313(f)(2)} If yes, does your company file the RUS annual report	(Yes/No) O	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports (Operating Report for Telecommunications		
(3016)	Borrowers) Document(s) with Balance Sheet, Income Statement		
(3017)	and Statement of Cash Flows If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement	•	
, ,	and Statement of Cash Flows	<b>V</b>	
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:	/	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		
(3023)	Underlying information subjected to a review by an independent certified public accountant		
(3024)	Underlying information subjected to an officer certification.		
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	310704MT3026.pdf

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(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 483
Data Collection Form	OMB Control No. 3060-0986/OM8 Control No. 3060-0819
	July 2013

<010>	Study Area Code	310704
<015>	Study Area Name	ACE TEL OF MICHIGAN
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	caweet@acentek.net

#### Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



Name of Attached Document Listing Required Information

(4005) Rural Broadband Experiment Additional Do REDACTED - FOR PUBLICANSPECTION

**Data Collection Form** 

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	310704
<015>	Study Area Name	ACE TEL OF MICHIGAN
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data li	
<039>	Contact Email Address - Email Address of person identified in data li	

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

#### Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes - attach new community anchors, no - no new anchors) to indicate whether this list will be provided.

#### If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses Name of Attached Document Listing Required Information of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

#### Broadband Deployment Locations - FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

Name of Attached Document Listing Required Information

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband Name of Attached Document Listing Required Information speed and data usage allowances available in the relevant geographic area.

	tion - Reporting Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310704
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<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilitie recipients; and, to the best of my knowledge, the information reporte	s include ensuring the accuracy of the annual reporting requirements for universal service suppo d on this form and in any attachments is accurate.
Name of Reporting Carrier: ACE TEL OF MICHIGAN	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/19/2017
Printed name of Authorized Officer: Todd Roesler	
Title or position of Authorized Officer: CEO	
Telephone number of Authorized Officer: 5078966292 ext.	
Study Area Code of Reporting Carrier: 310704	Filing Due Date for this form: 07/03/2017

	tion - Agent / Carrier lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310704	
<015>	Study Area Name	ACE TEL OF MICHIGAN	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net	

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) is authorized to submit the information reported on behalf of the reportal certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.					
Name of Authorized Agent:					
Name of Reporting Carrier:					
Signature of Authorized Officer:	Date:				
Printed name of Authorized Officer:					
Title or position of Authorized Officer:					
Telephone number of Authorized Officer:					
Study Area Code of Reporting Carrier:	Filing Due Date for this form:				

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	t Authorized to File Annual Reports for CAF or LI Rec	pients on Behalf of Reporting Carrier
I, as agent for the reporting carrier, certify that I am aut the data reported herein based on data provided by the	thorized to submit the annual reports for universal service sup e reporting carrier; and, to the best of my knowledge, the infor	port reciplents on behalf of the reporting carrier; I have provided mation reported herein is accurate.
Name of Reporting Carrier:		7-1
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee of Agen	nt	
Telephone number of Authorized Agent or Employee of A	gent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

(700) Pri	ce Offerings including Voice Rate Data		FCC Form 481		
Data Col	lection Form			ontrol No. 3060-0986/OM8 Control No. 3060-0819	
<010>	Study Area Code	310704			
<015>	Study Area Name	ACE TEL OF MICHIGAN			
<020>	Program Year	2018			
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet			
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.			
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweetescentek.net	W		
<701>	Residential Local Service Charge Effective Date 1/1/2017				
<702>	Single State-wide Residential Local Service Charge				

<703>

<a1></a1>	92	<a3></a3>	<b>4</b> 1>	₼⊅	<b3></b3>	d4>	<bs></bs>	40
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fed
мі	Buckley		FR	21.05	0.0	0.0	0.0	21.05
MI	Copemish Thompsonville		FR	21.05	0.0	0.0	0.0	21.05
MI	Hoxeyville		FR	21.05	0.0	0.0	0.0	21.05
Ml	Mesick		FR	21.05	0.0	0.0	0.0	21.05
MI	South Boardman		FR	21.05	0.0	0.0	0,0	21.05
								<del> </del>

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OM8 Control No. 3060-0819
	July 2013

<010>	Study Area Code	310704
<015>	Study Area Name	ACE TEL OF MICHIGAN
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
_<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net

				<0 <d1></d1>	<d2:< th=""><th>1</th><th></th><th><d4> Usage Allowance</d4></th></d2:<>	1		<d4> Usage Allowance</d4>
State	Exchange (ILEC)	Residential	State Regulated	Total Rates		Broadband Service	Usage Allowance	Action Taken
		Rate	Fees	and Fees	(Mbps)	-Upload Speed (Mbps)	(GB)	
	All		<del>                                     </del>		(IAIDD2)			When Limit Reached (select)
MI	1	59,95	0.0	59.95	10.0	1:0	999999	Other, no limit on usage allowand
MI	A11	49.95	0.0	49.95	15.0	1,0	999999	Other, no limit on usage allowand
мі	All	24.95	0.0	24.95	1.0	0.512	999999	Other, no limit on usage allowance
MI	A11	39.95	0.0	39,95	4.0	1.0	999999	Other, no limit on usage allowand
мі	A11	34.95	0.0	34.95	8.0	1.0	999999	Other, no limit on usage allowance
		ļ						
			<u> </u>					

	erating Companies lection Form			PCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		310704	
<015>	Study Area Name		ACE TEL OF MICHIGAN	
<020>	Program Year		2018	
<030>	Contact Name - Person L	JSAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	csweet@acentek.net	
<810>	Reporting Carrier	Ace Telephone Company of Michigan, Inc		
<811>	Holding Company	Acc Telephone Association		
<812>	Operating Company	Ace Telephone Company of Michigan, Inc		

(a)	αž	<a>3&gt;</a>
Affiliates	SAC	Doing Business As Company or Brand Designation
Ace Telephone Association	351346	AcenTek
Ace Telephone Association	361346	AcenTek
Ace Telephone Company of Michigan, Inc	310704	AcenTek
Ace Telephone Company of Michigan, Inc	310777	AcenTek
Ace Telephone Company of Michigan, Inc	310692	AcenTek
Ace Telephone Company of Michigan, Inc	310669	AcenTek
		<del>                                     </del>
A SECTION OF THE PROPERTY OF T		** * · · · · · · · · · · · · · · · · ·

#### FCC Form 481 FCC Form 481 - Carrier Annual ReporREDACTED - FOR PUBLIC INSPECTION OMB Control No. 3060-0986/OMB Control No. 3060-0819 **Data Collection Form** July 2013 <010> Study Area Code 310777 <015> Study Area Name Ace Telephone Co. of MI, Inc. (Old Mission) <020> Program Year <030> Contact Name: Person USAC should contact Cynthia Sweet with questions about this data <035> Contact Telephone Number: 5078966211 ext. Number of the person identified in data line <030> <039> Contact Email Address: Email of the person identified in data line <030> csweet@acentek.net Form Type 54.313 and 54.422

	vice Outage R ection Form	eporting (Voi	ice)						ON	C Form 481 1B Control No. 3060 2013	-0986/OMB Control I	No. 3060-0819
<010>	Study Area Co	ode				310777						
<015>	Study Area N	ame				Ace Telepho	ne Co. of MI, Inc	. (Old Mission)				
<020>	Program Year					2018						
<030>	Contact Name	- Person USA	C should contac	ct regarding this	s data	Cynthia Swe	et					
<035>	Contact Telep	hone Number	- Number of pe	erson identified	in data line <0	30> 5078966211	ext,					
<039>	Contact Email	Address - Ema	al Address of p	erson identified	d in data line <	030> csweet@acer	itek.net					
<210>	For the prior	r calendar ye	ar, were there	e any reportal	ble voice serv	rice outages?	No					
<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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(300) Unfu	Ifilled Service Request		500 Same 401
Data Collec			FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010>	Study Area Code	310777	
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net	
<300> Unf	ulfilled service request (voice)	0	
<310> Det	tail on attempts (voice)	····	
<320> Un	Name  fulfilled service request (broadband)	of Attached Document 0	1
<330> De	etail on attempts (broadband)	The state of Attacked Designation	

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OM8 Control No. 3060-0819
	July 2013

<010>	Study Area Code
<015>	Study Area Name  Ace Telephone Co. of MI, Inc. (Old Mireion)
<020>	Program Year 2014
<030>	Contact Name - Person USAC should contact regarding this data
<035>	Contact Telephone Number - Number of person identified in data line <030> 5074966211 axt.
<039>	Contact Email Address - Email Address of person identified in data line cawactacentek nat.  <030>
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<410>	Complaints per 1000 customers for fixed voice 0.0
<420>	Complaints per 1000 customers for mobile voice
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<440>	Complaints per 1000 customers for fixed broadband 0.0
<450>	Complaints per 1000 customers for mobile broadband

500) Con	npliance With Service Quality Standards and Consumer Protection Rules		FCC Form 481
ata Coli	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310777	
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	cewaat@acantek.net	
<500>	Certify compliance with applicable service quality standards and consumer pro-	otection rules Yes	
		310 <b>77</b> 7M <b>I</b> 510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	ules Compliance	
<515> (	Certify compliance with applicable minimum Service StandardS		

(600) Functionality in Emergency Situations Data Collection Form

# REDACTED - FOR PUBLIC INSPECTION B Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	310777
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynchia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 nxt.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cswnet@acentok.net
<600>	Certify compliance regarding ability to function in emergency situations	Yeв
<610>	Descriptive document for Functionality in Emergency Situations	310777MI610.pdf

	ice Offerings including Voice Rate Data Ilection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310777	
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data I	ine <030> 5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data	ine <030> csweet@acentek.net	
	Residential Local Service Charge Effective Date 1/1/2017 Single State-wide Residential Local Service Charge		

<701>	Residential Local Service Charge Effective Date	1/1/2017
<702>	Single State-wide Residential Local Service Charge	

_	(ab)	42>	<b>Q3&gt;</b>	   	\$2	<b3></b3>	<b4></b4>	<bs></bs>	(0)
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
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					See at	tached worksheet			
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	adbrand Price Offerings ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310777	
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030	> 507#966211 ext	
<039>	Contact Email Address - Email Address of person identified in data line <030	> csweet@acentek.net	

	qb	<a2></a2>	<b1></b1>	<b2></b2>	(0)	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed {Mbps}	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
<del></del>									
			-						
				- See attac	hed				
				worksheet -	1				
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	perating Companies Election Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0 July 2013		
<010>	Study Area Code		310777				
<015>	Study Area Name		Ace Telephone Co. of MI. Inc. (Old Mission) 2018 Cynthia Sweet				
<020>	Program Year						
<030>	Contact Name - Person	USAC should contact regarding this data					
<035>	Contact Telephone Nur	mber - Number of person identified in data line <030>					
<039>	Contact Email Address - Email Address of person identified in data line <030> csweeteacentek net						
<810>	Reporting Carrier	Ace Telephone Company of Michigan, Inc					
<811>	Holding Company	Ace Telephone Association					
<812>	Operating Company	Ace Telephone Company of Michigan, Inc					
<813>	Name of the Parket	<b>41</b> >	75 E 1 8 E 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<a2></a2>	<a3></a3>		
		Affiliates		SAC	Doing Business As Company or Brand Designation		
-	Mars MacCollege Street		See attached	workshee	et		
-	***************************************	3300 10 de					
-							
2	X						
-							
-							
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	ibal Lands Reporting Hection Form		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013	
<010>	Study Area Code	310777		
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)		
<020>	Program Year	2018		
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet		
<035>	The state of the s	5078966211 ext.		
<039> Contact Email Address - Email Address of person identified in data line <030>		csweet@acentek.net		
<900>	Does the filing entity offer tribal land services? (Y/N)	No		
<910>	Tribal Land(s) on which ETC Serves			
:920>	Tribal Government Engagement Obligation	Name of Attached Doo	cument	
fvour	company serves Tribal lands plans select (Var No. NA) for each there have			
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920,				
demonstrates coordination with the Tribal government pursuant to		Select		
§ 54.313(a)(9) includes:		Yes or No or		
921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	Not Applicable		
922>	Feasibility and sustainability planning,			
923>	Marketing services in a culturally sensitive manner;			
924>	Compliance with Rights of way processes			
925>	Compliance with Land Use permitting requirements			
26>	Compliance with Facilities Siting rules			
327>	Compliance with Environmental Review processes			
928>	Compliance with Cultural Preservation review processes			
929>	Compliance with Tribal Business and Licensing requirements.			

(0000)				Page			
	oice and Broadband Service Rate Comparability ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013			
<010>	Study Area Code		310777				
<015>	Study Area Name		Ace Telephone Co. of MI, Inc. (Old Mission)				
<020>	Program Year		2018				
<030>	Contact Name - Person USAC should contact regarding this data		Cynthia Sweet				
<035>	Contact Telephone Number - Number of person identified in data line	<030>	5078966211 ext.				
<039>	Contact Email Address - Email Address of person identified in data lin	e <030>	csweet@acentek.net				
<1000> <1010>	Voice services rate comparability certification  Attach detailed description for voice services rate comparability compliance	Yes	77MI1010.pdf				
			Name of Attached Documer	nt			
<1020>	Broadband comparability certification	Yes the	- Pricing is no more than the Wireline Competition Bureau	e most recent applicable benchmark announced by			
<1030>	Attach detailed description for broadband comparability compliance	31077	7MI1030.pdf				
			Name of Attached Documer	nt			

	o Terrestrial Backhaul Reporting lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310777
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext
<039>	Contact Email Address - Email Address of person identified in data line <030>	CsWeeL@acentek.net
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes
	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	i kbps

ifeline	erms and Condition for Lifeline Customers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		310777
<015>	Study Area Name		Ace Telephone Co. of MI, Inc. (Old Mission)
<020>	Program Year		2018
<030>	Contact Name - Person USAC should contact regarding this data		Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <0	030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <		caweet@acentek.net
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	31	9107 <b>77MI</b> 1210.pdf
		<u></u>	Name of Attached Document
<1220>	Link to Public Website HTT	ГР	
	osite listed, on line 1220, contains the required information pursuant to a)(2) annual reporting for ETCs receiving low-income support, carriers must eport:		
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,		
<1222>	Details on the number of minutes provided as part of the plan,	<u> </u>	
<1223>	Additional charges for toll calls, and rates for each such plan.		

Page 14

A STATE OF THE PARTY.	Cap Carrier Additional Documentation			FCC Form 481
Data Collect				OMB Control No. 3060-0986/OM8 Control No. 3060-0819
Including Ra	te-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			July 2013
_<010> St	udy Area Code	310777		
	udy Area Name	Ace Telephone Co. of M	I, Inc. (Old Mission)	
	ogram Year	2018		
	ontact Name - Person USAC should contact regarding this data	Cynthia Sweet		
	ontact Telephone Number - Number of person identified in data line <030>	5078966211 ext.		
<039> Co	ontact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net		
reductions	appropriate responses below (Yes, No, Not Applicable) to not , and Connect America Phase II support as set forth in 47 CFR : ntal Connect America Phase I reporting	e compliance as a recipi § 54.313(b),(c),(d),(e). Ti	ient of Incremental High Cost support, H he information reported on this form an	ligh Cost support to offset access charge d in the documents attached below is accurate.
<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note	that for the		
	July 2017 certification, this applies to Round 2 recipie Incremental Support.	ents of		
<2022>	Recipient certifies, representing year three after filing			
	acceptance of funding pursuant to 54.312(c), that the		······	
	question are not receiving support under the Broadb	and Initiatives		
	Program or the Broadband Technology Opportunities	Program for		
	projects that will provide broadband with speeds of a			
	Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients or			
.2022		•		
<2023>	The attachment on line 2024 includes a statement of			
	capital funding expended in the previous year in mee	ting Connect		
	America Phase I deployment obligations, accompanie	ed by a list of		
	census blocks indicating where funding was spent. To	his covers		
	year three - 54.313(b)(2)(ii). Round 2 recipients only.			
~2024As				
<2024A>	Round 2 Recipient of Incremental Support?			
<2024B>	Attach list of census blocks indicating where funding	was spent in year	Name of Attached Document Lis	ting
	three - 54.313(b)(2)(ii). Round 2 recipients only.		Required Information	
-2025 A.			Required information	
<2025A>	Round 2 Recipient of Incremental Support?			
<2025B>	Attach geocoded Information for Phase I milestone re	eports (Round 2 for	Name of Attached Document Lis	ting
	year three) - Connect America Fund , WC Docket 10-9		Required Information	·············
		o, neport and	Required information	
	Order, FCC 13-73, paragraph 35 (May 22, 2013).			
				· · · · · · · · · · · · · · · · · · ·
<2015>	2016 and future Frozen Support Certification 47 CFR	§ 54.313(c)(4)		

Income a d			
(2005) Price Cap Data Collection i	Carrier Additional Documentation	FCC Form 481	
	orm -Return Carriers affiliated with Price Cap Local Exchange Carriers	OMB Control No.	3060-0986/OMB Control No. 3060-0819
nercon, notes	Metalli carriers of militare cap total exchange carriers	July 2025	
Price Ca	p Carrier Connect America ICC Support {47 CFR § 54.313(d)}		
<2016>	Certification support used to build broadband		
Connect	America Phase II Reporting {47 CFR § 54.313(e)}		
<2017A>	Connect America Fund Phase II recipient?		
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.		
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information	
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)		

FCC Form 481

OM8 Control No. 3060-0986/OM8 Control No. 3060-0819 July 2013

<010> Study Area Code 310777 <015> Study Area Name Ace Telephone Co. of MI, Inc. (Old Mission) <020> Program Year 2018 <030> Contact Name - Person USAC should contact regarding this data Cynthia Sweet <035> Contact Telephone Number - Number of person identified in data line <030> 5078966211 ext. csweet@acentek.net <039> Contact Email Address - Email Address of person identified in data line <030>

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)		
		Yes - Attach Certifica	tion
(3010A)	Certification of Public Interest Obligations (47 CFR § 54.313(f)(1)(i)}		310777MI 3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3012A)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	No - No New Community Anchors	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	,
<b>(</b> )	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:		
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the	(Yes/No)	
(3019) (3020)	boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	<i>'</i>	
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:	1	
	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		
(3023)	Underlying information subjected to a review by an independent certified public accountant		
	Underlying information subjected to an officer certification.		
	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		31077987307 -47
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	310777MI3026.pdf

Page 17

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	310777
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Caweet@acentek.net

### Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

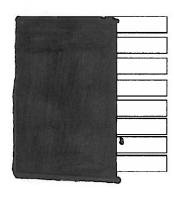
(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



Name of Attached Document Listing Required Information

(4005) Rural Broadband Experiment Additional Documentation TED - FOR PUBLIC INSPECTION

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

Study Area Code	310777
Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)
Program Year	2018
Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
Contact Telephone Number - Number of person identified in data li	
Contact Email Address - Email Address of person identified in data I	
	Study Area Name Program Year  Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data li

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

#### Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

#### Community Anchor Institutions - FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

#### If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filling deadline for the FCC Form 481.

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area.

must at least detail the pricing, offered broadband Name of Attached Document Listing Required Information -----

Certification - Reporting Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310777
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities in recipients; and, to the best of my knowledge, the information reported o	iclude ensuring the accuracy of the annual reporting requirements for universal service suppor In this form and in any attachments is accurate.
Name of Reporting Carrier: Ace Telephone Co. of MI, Inc. (Old	Mission)
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/19/2017
Printed name of Authorized Officer: Todd Roesler	
Title or position of Authorized Officer: CEO	
Telephone number of Authorized Officer: 5078966292 ext .	
Study Area Code of Reporting Carrier: 310777	Filing Due Date for this form: 07/03/2017

Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310777
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)	is authorized to submit the information reported on behalf of the	reporting carrier.
also certify that I am an officer of the reporting carrier; r agent; and, to the best of my knowledge, the reports an	responsibilities include ensuring the accuracy of the annual data reporting requirements provided lata provided to the authorized agent is accurate.	to the authorized
Name of Authorized Agent:		
Name of Reporting Carrier:		
Signature of Authorized Officer:	Date:	
Printed name of Authorized Officer:		
Title or position of Authorized Officer:		
Telephone number of Authorized Officer:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form	

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	Authorized to File Annual Reports for CAF or LI Recipi	ents on Behalf of Reporting Carrier
	norized to submit the annual reports for universal service suppor reporting carrier; and, to the best of my knowledge, the informa	
Name of Reporting Carrier:		,
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Fitle or position of Authorized Agent or Employee of Agent	<u> </u>	
Felephone number of Authorized Agent or Employee of Ag	rent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

A0355 CT	ce Offerings Including Voice Rate Data lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310777	
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net	
<701>	Residential Local Service Charge Effective Date 1/1/2017		
<702>	Single State-wide Residential Local Service Charge		

<703>

<b>Q1&gt;</b>	GD	<b>43&gt;</b>	40	Ф>	<bs></bs> cb3>	<b>d4&gt;</b>	<bs></bs> cb\$>	0
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
MI	Old Mission		FR	21.05	0.0	0.0	0.0	21,05
							• • • • • • • • • • • • • • • • • • • •	**
								<u> </u>

(710) Broadband Price Offerings		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OM8 Control No. 3060-0819
<b>数据是到2000年的企业还是进步的企</b>		July 2013

<010>	Study Area Code	310777
<015>	Study Area Name	Ace Telephone Co. of MI, Inc. (Old Mission)
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cavect@acentek.net

<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<<> <d1></d1>	<d2:< th=""><th><d3></d3></th><th>ALL THE DOOR</th><th><d4></d4></th></d2:<>	<d3></d3>	ALL THE DOOR	<d4></d4>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
WI	Old Mission	59,95	0.0	59.95	10.0	1.0	999999	Other, no limit on usage allowand
мі	Old Mission	49,95	0.0	49.95	15.0	1.0	999999	Other, no limit on usage allowance
мі	Old Mission	24.95	0.0	24 . 95	1.0	0.512	999999	Other, no limit on usage allowance
MI	Old Mission	39.95	0.0	39.95	4.0	1.0	999999	Other, no limit on usage allowand
мі	Old Mission	34.95	0.0	34.95	8.0	1.0	999999	Other, no limit on usage allowance
								Annie de la constante de la co
		·						
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	-		<del> </del>					
		<del> </del>						
			1					

1000000	erating Companies ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
<010>	Study Area Code		310777			
<015>	Study Area Name		Ace Telephone Co. of MI, Inc. (Old Mission)			
<020>	Program Year		2018			
<030>	Contact Name - Person U	ISAC should contact regarding this data	Cynthia Sweet			
<035>	Contact Telephone Numi	ber - Number of person identified in data line <030>	5078966211 ext.			
<039>	Contact Email Address - E	Email Address of person identified in data line <030>	Csweet@aCentek.net			
<810>	Reporting Carrier	Ace Telephone Company of Michigan, Inc				
<811>	Holding Company	Ace Telephone Association				
<812>	Operating Company	Ace Telephone Company of Michigan, Inc				

cal>	<a2></a2>	<a3></a3>
Affiliates	SAC	Doing Business As Company or Brand Designation
Ace Telephone Association	351346	AcenTek
Ace Telephone Association	361346	AcenTek
Ace Telephone Company of Michigan, Inc	310704	AcenTek
Ace Telephone Company of Michigan, Inc	310777	AcenTek
Ace Telephone Company of Michigan, Inc	310692	AcenTek
Ace Telephone Company of Michigan, Inc	310669	AcenTek
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200		
7 Total Control of the Control of th		

FCC For	rm 481 - Carrier Annual Report DACTED - Data Collection Form	FOR PUBLIC INSPECTION	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010>	Study Area Code	310669	
<015>	Study Area Name	ALLENDALE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Cynthia Sweet	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	csweet@acentek.net	
	Form Type	54 313 and 54 422	

	vice Outage R ection Form	eporting (Voi	ce)						OA	C Form 481 48 Control No. 3060 7 2013	-0986/OMB Control N	o. 3060-0819
<010>	Study Area Co	ode				310669						
<015>	Study Area Na	ame				ALLENDALE T	Er co					
<020>	Program Year					2018						
<030>	Contact Name	- Person USA	Should contac	t regarding this	s data	Cynthia Swe	et					
<035>	Contact Telep	hone Number	- Number of pe	rson identified	in data line <0	30> 5078966211	ext.					
<039>	Contact Email	Address - Ema	il Address of pe	erson identified	in data line <0	30> csweet@acer	itek.net					
<210>	For the prior	r calendar yea	ar, were there	any reportal	ble voice serv	ice outages?	No					
<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>&gt;</h>
	NORS Reference Number		Outage Start Time		Outage End Time	Number of Customers Affected	Total Number of	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventativ Procedure:
						· · · · · · · · · · · · · · · · · · ·		(100) 110	an mac approp	(100)	Nessenation .	110000010

4-1-12	fulfilled Service Request lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		310669	180 (1870) 180 (1870) 180 (1870) 180 (1870) 180 (1870) 180 (1870) 180 (1870) 180 (1870) 180 (1870) 180 (1870)
<015>	Study Area Name		ALLENDALE TEL CO	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regardi	ng this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person ider	ntified in data line <030>	5078966211 ext	
<039>	Contact Email Address - Email Address of person ide	ntified in data line <030>	csweet@acentek.net	
<300> U	Infulfilled service request (voice)		0	
<310> (	Detail on attempts (voice)			
		Narr	ne of Attached Document	
<320> Unfulfilled service request (broadband)		0		
<330>	Detail on attempts (broadband)			
		1	Name of Attached Document	

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code
<015>	Study Area Name ALLENDALE TEL CO
<020>	Program Year 203#
<030>	Contact Name - Person USAC should contact regarding this data
<035>	Contact Telephone Number - Number of person identified in data line <030> 5074966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line CEMBELORICELLER. IDENTIFY CONTACT CONT
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<410>	Complaints per 1000 customers for fixed voice 0 . 0
<420>	Complaints per 1000 customers for mobile voice
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<440>	Complaints per 1000 customers for fixed broadband 0.0
<450>	Complaints per 1000 customers for mobile broadband

	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	110669	
<015>	Study Are Name	ALLENDALE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext	
<039>	Contact Email Address - Email Address of person Identified in data line <030>	csweet@acentek.net	
<500>	Certify compliance with applicable service quality standards and consumer pro	tection rules Yes	
		310669MI510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	les Compliance	·
<515> (	Certify compliance with applicable minimum service standards		

(600) Functionality in Emergency Situations
Data Collection Form

REDACTED - FOR PUBLIC INSPECTION Control No. 3060-0986/OMB Control No. 3060-0986/O

<010>	Study Area Code	310669	
<015>	Study Area Name	ALLENDALE TEL CO	
<020>	Program Year	3014	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ax:	
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net	
<600>	Certify compliance regarding ability to function in emergency situations	Yes	
<610>	Descriptive document for Functionality in Emergency Situations	310669MI610.pdf	

(700) Price Offerings including Voice Rate Data  Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310669	
<015>	Study Area Name	ALLENDALE TEL CO	
<020>	Program Year	2018	<u> </u>
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data	line <030> 5078966211 ext	
<039>	Contact Email Address - Email Address of person identified in data	line <030> csweet@acentek.net	
	Residential Local Service Charge Effective Date 1/1/2017		

<a1></a1>	42	<a3></a3>	<b1></b1>	42	<b3></b3>	<b4></b4>	<b>455&gt;</b>	<0
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
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	<del> </del>	ł·		<del> </del>				<del></del>
<b>——</b>		<del>                                     </del>						<del> </del>
				See at	tached worksheet			
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		t						
<del></del>		1						<del> </del>

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	310669
<015>	Study Area Name	ALLENDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	> Csweet@acentek.net

	41>	(32)	<b1></b1>	<b2></b2>	(0	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
-	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
_									
_									
				See attac	hed				
						- 1			

	erating Companies lection Form					FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-081  July 2013
<010>	Study Area Code		310669			
<015>	Study Area Name		ALLENDALE TEL CO			- Allender
<020>	Program Year		2018			
<030>	Contact Name - Person	USAC should contact regarding this data	Cynthia Sweet			
<035>		nber - Number of person identified in data line <030>	5078966211 ext.			
<039>		Email Address of person identified in data line <030>	Caweet@acentek.r	et		
<810>	Reporting Carrier	Ace Telephone Company of Michigan, Inc				
<811>	Holding Company	Ace Telephone Association				
<812>	Operating Company	Ace Telephone Company of Michigan, Inc				P.W
<813>		(a)		<a2></a2>	377.63 (13.15)	<a>3&gt;</a>
		Affiliates		SAC	Doing	Business As Company or Brand Designation
			See attacl	ned worksh	et	
			See attacl	ned worksh	et	
-			See attacl	ned worksh	et	
-			See attacl	ned worksh	et	
			See attacl	ned worksh	et	
			See attacl	ned worksh	eet	

	bal Lands Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310669	
<015>	Study Area Name	ALLENDALE TEL CO	
<020>	Program Year	2018	4
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext	
<039>	Contact Email Address - Email Address of person Identified in data line <030>	csweet@acentek.net	
<900>	Does the filing entity offer tribal land services? (Y/N)	No	
<910>	Tribal Land(s) on which ETC Serves		
:920>	Tribal Government Engagement Obligation	Name of Attached	Document
f vour c	ompany serves Tribal lands, please select (Yes, No, NA) for each these boxes		
	rm the status described on the attached PDF, on line 920,		
	trates coordination with the Tribal government pursuant to	Select	
	3(a)(9) includes:	Yes or No or	
921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.  Feasibility and sustainability planning;	Not Applicable	
923>	Marketing services in a culturally sensitive manner;		
924>	Compliance with Rights of way processes		
925>	Compliance with Land Use permitting requirements		
926>	Compliance with Facilities Siting rules		
927>	Compliance with Environmental Review processes		
	Compliance with Cultural Preservation review processes		
928>	Compliance with Cultural Preservation review processes		

	oice and Broadband Service Rate Comparability ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		310669
<015>	Study Area Name		ALLENDALE TEL CO
<020>	Program Year		2018
<030>	Contact Name - Person USAC should contact regarding this data		Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line	<030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line	e <030>	cnweet@acentek.net
<1000> <1010>	Voice services rate comparability certification  Attach detailed description for voice services rate comparability compliance	31066	59MI1010.pdf
			Name of Attached Document
<1020>	Broadband comparability certification		- Pricing is no more than the most recent applicable benchmark announced believed to the Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	31066	9MI1030.pdf
			Name of Attached Document

	o Terrestrial Backhaul Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310669	
<015>	Study Area Name	ALLENDALE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Csweetsacentek.net	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
11102	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

Lifeline	erms and Condition for Lifeline Customers lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 30 July 2013	60-0819
<010>	Study Area Code		310669	
<015>	Study Area Name		ALLENDALE TEL CO	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this data		Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data	line <030>	5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data	line <030>	csweet@acentek.net	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		310669MI1210.pdf	
		L	Name of Attached Document	
<1220>	Link to Public Website	НТТР		
	ubsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers mureport:	ıst	· ·	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	<b>/</b>		
<1222>	Details on the number of minutes provided as part of the plan,	<b>/</b>		
<1223>	Additional charges for toll calls, and rates for each such plan.	<b>/</b>		

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Data Colle	ice Cap Carrier Additional Documentation ection Form Rate-of-Return Carriers offiliated with Price Cap Local Exchange Carriers			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310669		
<015>	Study Area Name	ALLENDALE TEL CO		
<020>	Program Year	2018		
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet		
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	CsWeet@acentek.net		
reductio	ne appropriate responses below (Yes, No, Not Applicable) to note ons, and Connect America Phase II support as set forth in 47 CFR § nental Connect America Phase I reporting	e compliance as a recipi § 54.313(b),(c),(d),(e). T	ent of Incremental High Cost support, Hi he information reported on this form and	gh Cost support to offset access charge in the documents attached below is accurate.
<2011>	> 3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note July 2017 certification, this applies to Round 2 recipie Incremental Support.			
<2022>	* *	e locations in and Initiatives Program for t least 4		
<2023>	The attachment on line 2024 includes a statement of capital funding expended in the previous year in mee America Phase I deployment obligations, accompanie census blocks indicating where funding was spent. The year three - 54.313(b)(2)(ii). Round 2 recipients only.	the total amount of ting Connect ed by a list of		
<2024A	A> Round 2 Recipient of Incremental Support?			
<2024B	Attach list of census blocks indicating where funding v three - 54.313(b)(2)(ii). Round 2 recipients only.	vas spent in year	Name of Attached Document List Required Information	ing
<2025A				
<2025B	Attach geocoded Information for Phase I milestone re year three) - Connect America Fund , WC Docket 10-9 Order, FCC 13-73, paragraph 35 (May 22, 2013).		Name of Attached Document List Required Information	ing

<2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)

age 15

2005) Price Cap Carrier Additional Documentation Data Collection Form		FCC Form 481  • OMB Control No. 3060-0986/OMB Control No. 3060-0819	
ncluding Rate-of	-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013	
<2016>	p Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}		
<2017A>	Connect America Fund Phase II recipient?		
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.		
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information	
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54 313(e)(1)(ii)(f)		

**Data Collection Form** 

FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	310669
<015>	Study Area Name	ALLENDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)		
(3010A)	Certification of Public Interest Obligations (47 CFR §	Yes - Attach Certifica	ation
(3010B)	54.313(f)(1)(i)) Please Provide Attachment	Name of Attached Document Listing Required	310669MI3010.pdf
•		Information	
(3012A)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	No - No New Community Anchors	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))	(Yes/No)	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers	<b>/</b>	
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	1	
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:	*	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		
(3023)	Underlying information subjected to a review by an independent certified public accountant		
(3024)	Underlying information subjected to an officer certification.		
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		210/2011/102
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	310669MI3026.pdf

Page 17

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OM8 Control No. 3060-0819
	July 2013

<010>	Study Area Code	310669
<015>	Study Area Name	ALLENDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cowect@acentek.net

### Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



Name of Attached Document ilsting Required Information

(4005) Rural Broadband Experiment Additional Documentation TED - FOR PUBLIC INSPECTION

**Data Collection Form** 

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

Study Area Code	310669
Study Area Name	ALLENDALE TEL CO
Program Year	2018
Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
Contact Telephone Number - Number of person identified in data li	
	Study Area Name Program Year

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

#### Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

#### Community Anchor Institutions - FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

### If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses Name of Attached Document Listing Required Information of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

### Broadband Deployment Locations - FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the deadline for the FCC Form 481.

June 1st immediately preceding the July 1st filing Name of Attached Document Listing Required Information

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband Name of Attached Document Listing Required Information speed and data usage allowances available in the relevant geographic area.

Certification - Reporting Carrier Data Collection Form			CC Form 481 DMB Control No. 3060-0986/OMB Control No. 3060-0819 uly 2013
<010>	Study Area Code	310669	
<015>	Study Area Name	ALLENDALE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net	

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities in	clude ensuring the accuracy of the annual reporting requirements for universal service support
eciplents; and, to the best of my knowledge, the information reported o	
lame of Reporting Carrier: ALLENDALE TEL CO	
ignature of Authorized Officer: CERTIFIED ONLINE	Date 06/19/2017
rinted name of Authorized Officer: Todd Roesler	
itle or position of Authorized Officer: CEO	
elephone number of Authorized Officer: 5078966292 ext.	
tudy Area Code of Reporting Carrier: 310669	Filing Due Date for this form: 07/03/2017

Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310669
<015>	Study Area Name	ALLENDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Csweet@acentek.net

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier				
is authorized to submit the information reported on behalf of the reporting carrier is authorized to submit the information reported on behalf of the reporting carrier also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.				
Name of Authorized Agent:				
Name of Reporting Carrier:				
Signature of Authorized Officer:		Date:		
Printed name of Authorized Officer:				
Title or position of Authorized Officer:				
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			
Persons willfully making false statements on this form	n can be punished by fine or forfeiture under the Communication under Title 18 of the United States Code, 18 U.S.C. § 1	ons Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment 001.		

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	Authorized to File Annual Reports for CAF or LI Recipie	ents on Behalf of Reporting Carrier
	norized to submit the annual reports for universal service suppor reporting carrier; and, to the best of my knowledge, the informa	
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee of Agent	i e	,
Telephone number of Authorized Agent or Employee of Ag	gent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

	ice Offerings including Voice Rate Data lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310669	
<015>	Study Area Name	ALLENDALE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	50 <b>7</b> 8966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Caweet@acentek.net	
<701>	Residential Local Service Charge Effective Date 1/1/2017		
<702>	Single State-wide Residential Local Service Charge		

<703>

Q1>	45	<b>ca3&gt;</b>	41>	ΦΣ	<b3></b3>	   	<bs></bs>	(0)
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
MI	Allendale		PR	19.73	0.0	0 - 0	0.0	19.73

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	310669
<015>	Study Area Name	ALLENDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net

<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<	<d2></d2>	<d3></d3>		<d4></d4>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
мі	Allendale	49.95	0.0	49.95	100.0	50.0	999999	Other, no limit on usage allowan
MI	Allendale	49.95	0.0	49.95	10.0	1.0	999999	Other, no limit on usage allowan
мі	Allendale	49.95	0.0	49.95	15.0	1.0	999999	Other, no limit on usage allowan
мі	Allendale	99.95	0.0	99.95	1000.0	100.0	999999	Other, no limit on usage allowar
MI	Allendale	24.95	0.0	24.95	1.0	0.512	99 <b>999</b> 9	Other, no limit on usage allowan
мі	Allendale	29.95	0.0	29.95	4.0	1.0	999999	Other, no limit on usage allowar
мі	Allendale	34.95	0.0	34.95	8.0	1.0	999999	Other, no limit on usage allowan
MI	Allendale	29.95	0.0	29.95	10.0	1:0	999999	Other, no limit on usage allowan
					h <del>-1</del>			
· · · · · · · · ·			-		-			
		+						

		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-081: July 2013					
Study Area Code 310	669						
Study Area Name AL	LENDALE TEL CO						
Program Year 20	18						
Contact Name - Person USAC should contact regarding this data cyr	thia Sweet						
Contact Email Address - Email Address of person identified in data line <030> cs	weet@acentek.net						
Reporting Carrier Ace Telephone Company of Michigan, Inc							
Holding Company Ace Telephone Association							
Operating Company Ace Telephone Company of Michigan, Inc							
<a1></a1>	(a)	<a3></a3>					
Affiliates	SAC	Doing Business As Company or Brand Designation					
Ace Telephone Association	351346	AcenTek					
		AcenTek					
	310704	AcenTek					
	310777	AcenTek					
Ace Telephone Company of Michigan, Inc	310692	AcenTek					
Ace Telephone Company of Michigan, Inc	310669	AcenTek					
	Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <0300 can Reporting Carrier Ace Telephone Company of Michigan, Inc Holding Company Ace Telephone Company of Michigan, Inc	Study Area Code  Study Area Name  Program Year  Contact Name - Person USAC should contact regarding this data  Contact Telephone Number - Number of person identified in data line <030>  Contact Email Address - Email Address of person identified in data line <030>  Contact Email Address - Email Address of person identified in data line <030>  Reporting Carrier  Ace Telephone Company of Michigan, Inc  Holding Company  Ace Telephone Company of Michigan, Inc  Ace Telephone Association  Ace Telephone Association  Ace Telephone Association  Ace Telephone Company of Michigan, Inc  31046  Ace Telephone Company of Michigan, Inc  310477  Ace Telephone Company of Michigan, Inc  3104692					

FCC For	m 481 - Carrier Annual RepoREDACTED -  Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
<010>	Study Area Code	310692	
<015>	Study Area Name	DRENTHE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Cynthia Sweet	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	csweet@acentek.net	
	Form Type	54.313 and 54.422	

	vice Outage R lection Form	eporting (Vol	ce)						OA OA	C Form 481 //B Control No. 3060 y 2013	-0986/OMB Control N	lo. 3060-0819
<010>	Study Area Co	ode				310692						
<015>	Study Area Na	ame				DRENTHE TEL	со					
<020>	Program Year					2018						······
<030>	Contact Name	- Person USA	should contac	t regarding this	s data	Cynthia Swe	et					
<035>	Contact Telep	hone Number	- Number of pe	rson identified	in data line <0	30> 5078966211	ext.					
<039>	Contact Email	Address - Ema	il Address of pe	erson identified	in data line <0	30> caweet@acen	tek.net					
<210>	For the prior	calendar yea	r, were there	any reportal	ole voice serv	ice outages?	No					
<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	400	-1
	NORS Reference Number	Outage Start Date	Outage Start Time		Outage End	Number of Customers Affected	Total Number of	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	<g> Service Outage Resolution</g>	<h>&gt;</h>
	<b></b>											
	<del></del>											
	<del>  </del>											
	<del>   </del>											

(300) Un	fulfilled Service Request		FCC Form 481
Data Col	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310692	
<015>	Study Area Name	DRENTHE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data li	ne <030> csweet@acentek.net	
<300> U	Unfulfilled service request (voice)	0	
<310>	Detail on attempts (voice)		
	*****	Name of Attached Document	
<320>	Unfulfilled service request (broadband)	0	
1770	Davidson to see the second		
<330>	Detail on attempts (broadband)		
		Name of Attached Document	

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
(2) 10 12 12 12 12 12 12 12 12 12 12 12 12 12	July 2013

<010>	Study Area Code
<015>	Study Area Name DREFTHE TEL CO
<020>	Program Year 2018
<030>	Contact Name - Person USAC should contact regarding this data
<035>	Contact Telephone Number - Number of person identified in data line <030>
<039>	Contact Email Address - Email Address of person identified in data line caweet@acentok.net.
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<410>	Complaints per 1000 customers for fixed voice 0.0
<420>	Complaints per 1000 customers for mobile voice
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<440>	Complaints per 1000 customers for fixed broadband 0.0
<450>	Complaints per 1000 customers for mobile broadband

	npliance With Service Quality Standards and Consu <b>mer Protection Rules</b> ection Form		FCC Form 481 OMB Control No.* 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310692	
<015>	Study Area Name	DRENTHE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet.	
<035>	Contact Telephone Number - Number of person identified in data line <030>	507A966211 ext	
<039>	Contact Email Address - Email Address of person identified in data line <030>	CHWOOT SACENTOK. not	
<500>	Certify compliance with applicable service quality standards and consumer pro	otection rules Yes	10 10 10 10 10 10 10 10 10 10 10 10 10 1
		310692MI510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	les Compliance	
<515> C	ertify compliance with applicable minimum servic® Standards		

(600) Functionality in Emergency Situations **Data Collection Form** 

# REDACTED - FOR PUBLIC INSPECTION AB Control No. 3060-0986/OM8 Control No. 3060-0819 July 2013

<010>	Study Area Code	310692
<015>	Study Area Name	DREWTHE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 mxt.
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	310692MI610.pdf

(700) Price Offerings including Voice Rate Data Data Collection Form			FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310692	
<015>	Study Area Name	DRENTHE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data	line <030> 5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data	line <030> csweet@acentek.net	
	Residential Local Service Charge Effective Date  1/1/2011 Single State-wide Residential Local Service Charge		

(101)	Residential Local Service Charge Effective Date	1/1/2017
<702>	Single State-wide Residential Local Service Charge	

Q1>	42	<a3></a3>	<b>&lt;</b> 01>	4≥	<b3></b3>	 cb4>	<bs></bs> <bs></bs>   	(0)
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fed
· · · · · ·								
·			***************************************					
				See at	tached worksheet			
							·	ļ
						19		

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	310692
<015>	Study Area Name	DRENTHE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030	csweet@acentek.net

1000	gb	<92>	<b1></b1>	<b2></b2>	40	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
$\vdash$									
$\vdash$							9		
				See attac	hed				
-			<del></del>	worksheet -	1				
$\vdash$									
-				l					
-			<u> </u>						
			+						

	erating Companies				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		310692		
<015>	Study Area Name		DRENTHE TEL CO		· · · · · · · · · · · · · · · · · · ·
<020>	Program Year		2018		The state of the s
<030>	Contact Name - Person	USAC should contact regarding this data	Cynthia Sweet		
<035>		nber - Number of person identified in data line <030>	5078966211 ext.		
<039>		Email Address of person identified in data line <030>	caweetwacentek	, net	
<810>	Reporting Carrier	Ace Telephone Company of Michigan, Inc.			
<811>	Holding Company	Ace Telephone Association			
<812>	Operating Company	Ace Telephone Company of Michigan, Inc			
<813>	Secretarion	<a1></a1>		<a2></a2>	<a>3&gt;</a>
	-	Affillates		SAC	Doing Business As Company or Brand Designation
125 23			See attac	ched worksh	eqt
2) <b>-</b>			See allac	med worksn	<del>461</del>
3	332.00				
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-					
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-					
-					

CONTRACTOR OF THE PARTY OF THE	bal Lands Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	310692	
<015>	Study Area Name	DRENTHE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext	
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net	
<900>	Does the filing entity offer tribal land services? (Y/N)	No	
910>	Tribal Land(s) on which ETC Serves		
920>	Tribal Government Engagement Obligation	Name of Attached	d Document
your	ompany serves Tribal lands, please select (Yes, No, NA) for each these boxes		
	rm the status described on the attached PDF, on line 920,		
	trates coordination with the Tribal government pursuant to	Select	
54.313	B(a)(9) includes:	Yes or No or Not Applicable	
921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	· · · · · · · · · · · · · · · · · · ·	
922>	Feasibility and sustainability planning;		1.67
923>	Marketing services in a culturally sensitive manner;		
924>	Compliance with Rights of way processes		
25>	Compliance with Land Use permitting requirements		
26>	Compliance with Facilities Siting rules		
27>	Compliance with Environmental Review processes		
928>	Compliance with Cultural Preservation review processes		

			Page
(1000) Voice and Broadband Service Rate Comparability Data Collection Form			FCC Form 481 OM8 Control No. 3060-0986/OM8 Control No. 3060-0819 July 2013
<010>	Study Area Code		310692
<015>	Study Area Name		DRENTHE TEL CO
<020>	Program Year		2018
<030>	Contact Name - Person USAC should contact regarding this data		Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data li	ne <030>	5078966211 ext
<039>	Contact Email Address - Email Address of person identified in data I	ine <030>	GgWect@acentek.net
<1000> <1010>	Voice services rate comparability certification  Attach detailed description for voice services rate comparability compliance	Yes 31069	92MI1010.pdf
			Name of Attached Document
<1020>	Broadband comparability certification		- Pricing is no more than the most recent applicable benchmark announced by Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	31069	2MI1030.pdf

Study Area Code  O155 Study Area Name  O260 Program Year  O375 Contact Telephone Number - Number of person identified in data line <0300 Contact Telephone Number - Remail Address of person identified in data line <0300 Contact Telephone Number - Standard Remail Address - Email Address of person identified in data line <0300 Contact Telephone Number - Number of person identified in data line <0300 Contact Telephone Number - Number of person identified in data line <0300 Contact Temail Address - Email Address of person identified in data line <0300 Contact Temail Address - Email Address of person identified in data line <0300 Contact Temail Address - Email Address of person identified in data line <0300 Contact Temail Address - Email Address - Email Address of person identified in data line <0300 Contact Temail Address - Email Address -		o Terrestrial Backhaul Reporting lection Form			FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-08  July 2013
<030> Program Year <030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> <039> Contact Email Address - Email Address of person identified in data line <030> Certify whether terrestrial backhaul options exist (Y/N) Yes <1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<010>	Study Area Code	31069	2	
Contact Name - Person USAC should contact regarding this data  Cynthia Sweet  Contact Telephone Number - Number of person identified in data line <030>  Contact Email Address - Email Address of person identified in data line <030>  Contact Email Address - Email Address of person identified in data line <030>  Certify whether terrestrial backhaul options exist (Y/N)  Yes  Cavectoacentek.net  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<015>	Study Area Name	DRENT	HE TEL CO	
Contact Telephone Number - Number of person identified in data line <030> 507856211 ext.  Contact Email Address - Email Address of person identified in data line <030> cawceteacontok.net  Certify whether terrestrial backhaul options exist (Y/N)  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<020>	Program Year	2018		
Contact Telephone Number - Number of person identified in data line <030> 5078966211 ext.  Contact Email Address - Email Address of person identified in data line <030> caweet@acontok.net  Certify whether terrestrial backhaul options exist (Y/N)  Yes  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<030>	Contact Name - Person USAC should contact regarding this data	Cynth	ia Sweet	
Certify whether terrestrial backhaul options exist (Y/N)  Yes  Yes  Yes  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<035>	Contact Telephone Number - Number of person identified in data line <030>			
<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<039>	Contact Email Address - Email Address of person identified in data line <030>	cavee	t@acentek.net	
reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	:1100>	Certify whether terrestrial backhaul options exist (Y/N)		Yes	
	1130>	reporting carrier offers broadband service of at least 1 Mbps downstream and 256	kbps		

Lifeline	erms and Condition for Lifeline Customers  lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		310692	
<015>	Study Area Name			
<020>	Program Year		DRENTHE TEL CO	
<030>	Contact Name - Person USAC should contact regarding this data		2018	
<035>	Contact Telephone Number - Number of person identified in data	line <030	Cynthia Sweet > 5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data			
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		310692MI1210 pdf	
				Name of Attached Document
:1220>	Link to Public Website	HTTP		
	ebsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers mure report:	ust		
1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	<b>V</b>		
1222>	Details on the number of minutes provided as part of the plan,	<b>V</b>		
1223>	Additional charges for toll calls, and rates for each such plan.	<b>/</b>		

age 14

Data Collec	e Cap Carrier Additional Documentation tion Form ate-of-Return Carners of fillated with Price Cap Local Exchange Carriers			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
		310692		
	itudy Area Code Study Area Name	DRENTHE TEL CO		
	Program Year	2018	• • • • • • • • • • • • • • • • • • • •	
	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet		
	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.		
<039> C	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net		
Select the reduction	appropriate responses below (Yes, No, Not Applicable) to not s, and Connect America Phase II support as set forth in 47 CFR	e compliance as a recipi § 54.313(b),(c),(d),(e). Ti	ent of Incremental High Cost support, H he information reported on this form and	igh Cost support to offset access charge d in the documents attached below is accurate.
Increme	ental Connect America Phase I reporting			
<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note July 2017 certification, this applies to Round 2 recipie Incremental Support.	nts of		
<2022>	Recipient certifies, representing year three after filing acceptance of funding pursuant to 54.312(c), that the question are not receiving support under the Broadb Program or the Broadband Technology Opportunities projects that will provide broadband with speeds of a Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients or	e locations in and Initiatives : Program for it least 4 ily.		
<2023>	The attachment on line 2024 includes a statement of capital funding expended in the previous year in mee America Phase I deployment obligations, accompanicensus blocks indicating where funding was spent. Tyear three - 54.313(b)(2)(ii). Round 2 recipients only.	ting Connect ed by a list of his covers		
<2024A	> Round 2 Recipient of Incremental Support?			
<2024B>	<ul> <li>Attach list of census blocks indicating where funding three - 54.313(b)(2)(ii). Round 2 recipients only.</li> </ul>	was spent in year	Name of Attached Document List Required Information	ing
<2025A	> Round 2 Recipient of Incremental Support?			
<2025B>	<ul> <li>Attach geocoded Information for Phase I milestone re year three) - Connect America Fund , WC Docket 10-9 Order, FCC 13-73, paragraph 35 (May 22, 2013).</li> </ul>		Name of Attached Document List Required Information	ing
<2015>	2016 and future Frozen Support Certification 47 CFR	§ 54.313(c)(4)		

(2005) Price Cap Data Collection F	Carrier Additional Documentation	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 306	50-0819
ncluding Rate-of-	-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013	MESSY.
<2016>	p Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}		
	Connect America Fund Phase II recipient?		
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.		
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information	
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable officience. 54.313(A)(A)(B)(C)		

2005) Rate Of Return Carrier Additional Documentation REDACTED - FOR PUBLIC INSPECTION at a Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	310692
<015>	Study Area Name	DRENTHE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)			
		Υ	Yes - Attach Certific	cation
(3010A)	Certification of Public Interest Obligations (47 CFR § 54.313(f)(1)(i))			310692MI3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Docu Information	ment Listing Required	
(3012A)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	No - No New Community	Anchors	
(3012B)	Please Provide Attachment	Name of Attached Docu Information	iment Listing Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}		<ul><li>○</li><li>○</li><li>○</li></ul>	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	$\circ$	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports			
	(Operating Report for Telecommunications		<del>-</del>	
(3016)	Borrowers)  Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Docu Information	ment Listing Required	
(3018)	If the response is no on line 3014, is your company	(Yes/No)	$\odot$ $\bigcirc$	
(3019)	audited?  If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:  Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		· ·	
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:		7	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3023)	Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
3026)	Attach the worksheet listing required information	Name of Attached Docur Information	ment Listing Required	31 <b>0</b> 692MI3026.pdf

Page 17

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OM8 Control No. 3060-0986/OM8 Control No. 3060-0819
	July 2013

<010>	Study Area Code	310692
<015>	Study Area Name	DRENTHE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Caweet@acentek.net

#### Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

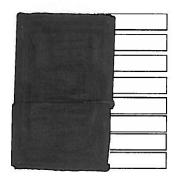
(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



(4005) Rural Broadband Experiment Additional CREPACTED - FOR PUBLIC INSPECTION

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	310692
<015>	Study Area Name	DRENTHS TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in da	
<039>	Contact Email Address - Email Address of person identified in da	

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

#### Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

#### Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

#### If yes to 4003A, please provide a response for 4003B.

relevant geographic area.

The second broader by a second a second second second	,,,,	
4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	
Broadband Deployment Locations – FCC 14-98 (par	agraph 80)	
4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	
4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the	Name of Attached Document Listing Required Information	

	tion - Reporting Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No July 2013	. 3060-0819
<010>	Study Area Code	310692	
<015>	Study Area Name	DRENTHE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net	

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities i recipients; and, to the best of my knowledge, the information reported	nclude ensuring the accuracy of the annual reporting requirements for universal service suppor on this form and in any attachments is accurate.
Name of Reporting Carrier: DRENTHE TEL CO	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/19/2017
Printed name of Authorized Officer: Todd Roesler	
Title or position of Authorized Officer: CEO	
Telephone number of Authorized Officer: 5078966292 ext.	9
Study Area Code of Reporting Carrier: 310692	Filing Due Date for this form. 07/03/2017

	tion - Agent / Carrier lection Form	0	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
<010>	Study Area Code	310692			
<015>	Study Area Name	DRENTHE TEL CO			
<020>	Program Year	2018			
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet			
<035>	Contact Telephone Number - Number of person identified in data line <030>	5078966211 ext.			
<039>	Contact Email Address - Email Address of person identified in data line <030>	csweet@acentek.net			

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; agent; and, to the best of my knowledge, the reports ar	is authorized to submit the information reported on behalf of the reporting carrier. sponsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized a provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized	to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
	nit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provide er; and, to the best of my knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent	
Telephone number of Authorized Agent or Employee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished	by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001

Attachments

(700) Price Offerings including Voice Rate Data		FCC Form 481		
Data Col	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
<010>	Study Area Code	310692		
<015>	Study Area Name	DRENTHE TEL CO		
<020>	Program Year	2018		
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet		
<035>	Contact Telephone Number - Number of person Identified in data line <030>	5078966211 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	csWeet@acentek.net		
<701>	Residential Local Service Charge Effective Date 1/1/2017			
<702>	Single State-wide Residential Local Service Charge			

<703>

<b>41</b>	۹Þ	<a3></a3>	<b>4</b> D	Ф⊅	<b3></b3>	<b>4</b> 4>	<bs></bs>	0
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
MI	Drenthe		FR	21.5	0.0	0.0	0.0	21.5
	-							

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

_<010>	Study Area Code	310692
<015>	Study Area Name	DRENTHE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Cynthia Sweet
<035>	Contact Telephone Number - Number of person identified in data line <030>	50789C6211 ext
<039>	Contact Email Address - Email Address of person identified in data line <030>	cawesteacentek, net

<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<0 <d1></d1>	<d2></d2>	<d3></d3>	243349 4111	<d4></d4>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
мі	Drenthe	49.95	0.0	49.95	10.0	1.0	999999	Other, no limit on usage allowance
MI	Drenthe	49.95	0.0	49.95	15.0	1,0	999999	Other, no limit on usage allowance
MI	Drenthe	24.95	0.0	24.95	1.0	0.512	999999	Other, no limit on usage allowand
мі	Drenthe	29.95	0.0	29.95	4.0	1,0	999999	Other, no limit on usage allowance
MI	Drenthe	34.95	0.0	34.95	8.0	1.0	999999	Other, no limit on usage allowance
MI	Drenthe	29.95	0.0	29.95	10.0	1.0	999999	Other, no limit on usage allowand
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100	erating Companies lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		310692	
<015>	Study Area Name		DRENTHE TEL CO	
<020>	Program Year		2018	
<030>	Contact Name - Person	USAC should contact regarding this data	Cynthia Sweet	
<035>	Contact Telephone Num	nber - Number of person identified in data line <030>	5078966211 ext.	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	cswest@acentek.net	
<810>	Reporting Carrier	Ace Telephone Company of Michigan, Inc		
<811>	Holding Company	Ace Telephone Association		
<812>	Operating Company	Ace Telephone Company of Michigan, Inc		
<813>	72.65 (2.65 days)	<b>G1</b> >	<a2></a2>	<a3></a3>
		Affiliates	SAC	Doing Business As Company or Brand Designation

Affiliates	SAC	Doing Business As Company or Brand Designation
Ace Telephone Association	351346	AcenTek
Ace Telephone Association	361346	AcenTek
Ace Telephone Company of Michigan, Inc	310704 .	AcenTek
Ace Telephone Company of Michigan, Inc	310777	AcenTek
Ace Telephone Company of Michigan, Inc	310692	AcenTek
Ace Telephone Company of Michigan, Inc	310669	AcenTek
	<u> </u>	
	ļ	

Study Area Name: Ace Telephone Company of Michigan, Inc.

Study Area Code: 310704, 310777, 310669 and 310692

State: Michigan

Form 481 Line 510

Compliance with Applicable Service Quality Standards and Consumer Protection Rules

As a local exchange carrier in Michigan, Ace Telephone Company of Michigan, Inc.

(Carrier) is obligated to comply with the numerous consumer protections contained in the

Michigan Telecommunications Act and all MPSC Guidelines and Rules promulgated or adopted

there under. Carrier has established operating procedures designed to facilitate compliance with

such consumer protections rules and service quality standards. As part of the operating procedures,

appropriate training is conducted for employees.

Carrier hereby certifies that it is complying with all applicable and effective Michigan

Public Service Commission and FCC consumer protection rules and service quality standards;

which include MPSC Customer Migration Rules, Anti-Slamming Rules, Red Flag Rules and

CPNI. Carrier has a Customer Proprietary Network Information (CPNI) Manual which reflects

the FCC's current CPNI rules, a copy of the manual has been previously submitted to the MPSC.

Carrier has also implemented an Identity Theft Prevention Program in accordance with the Federal

Red Flags Rule and other applicable requirements governing the protection of customers' privacy.

Study Area Name: Ace Telephone Company of Michigan, Inc.

SAC: 310704, 310777, 310669 and 310692

State: Michigan Form 481 Line 610

damaged.

Certification that the carrier is able to function in emergency situations

Ace Telephone Company of Michigan, Inc. (Carrier) hereby certifies that it is able to function in emergency situations through the use of back-up power to ensure functionality without an external power source. Carrier has backup battery reserve in its central office and in electronic equipment sites, which enables it to provide service for a minimum of 8 hours. Carrier's service is consistent with requirements of the Michigan Telecommunications Act Section 2305c and the obligations to provide service in emergency situations as set forth in the Code of Federal Regulations, Title 47 § 54.202(a)(2). The Carrier's network is engineered to provide maximum capacity in order to handle excess traffic in the event of traffic spikes resulting from emergency situations. Carrier has redundancy in its network for use in re-rerouting traffic when facilities are

Study Area Name: Ace Telephone Company of Michigan, Inc.

SAC: 310704, 310777, 310669 and 310692

State: Michigan

Form 481 Line Number 1010

Descriptive document for Voices Services Rate Comparability

The Wireline Competition Bureau's most recent reasonable comparability benchmark for fixed voice services is \$49.51, which includes the federal subscriber line charge ("SLC").

In all exchanges served by Ace Telephone Company of Michigan, Inc., the single line residential local service rate including any mandatory extended area service charge, federal SLC, and any applicable state fees is less than \$49.51.

Ace Telephone Company of Michigan, Inc. certifies the pricing of its basic residential voice services is below the benchmark of \$49.51.

Study Area Name: Ace Telephone Company of Michigan, Inc.

SAC: 310704, 310777, 310669 and 310692

State: Michigan

Form 481 Line Number 1030

Descriptive document for Broadband Service Rate Comparability

The Wireline Competition Bureau announced the results of the Urban Rate Survey for Broadband Services. "To facilitate benchmark calculations, the Bureau will post an Excel file and online tool in which providers can plug the relevant variables to determine the benchmark for specific service characteristics at http://www.fcc.fov/encyclopedia/urban-rate-survey-data."

Ace Telephone Company of Michigan, Inc. certifies that it offers a Broadband service to residential subscribers at pricing that is no more than the applicable benchmark rate.

Study Area Name: Ace Telephone Company of Michigan, Inc.

SAC: 310704, 310777, 310669 and 310692

State: Michigan

Line 1210 Terms and Condition for Voice Lifeline Plans

Lifeline Assistance Program

Financial assistance through the Lifeline program is available to help eligible customers afford and maintain basic telephone or broadband internet service. Lifeline participation enables customers to stay connected to jobs, family, community resources, and government and emergency services. Lifeline is a Federal and Michigan program that assists customers by providing a monthly credit up to \$11.25 on their voice service or \$9.25 on their internet service. Seniors aged 65 and older can receive additional discounts.

Lifeline benefits are limited to one wireline, internet or wireless phone per qualified household. Households eligible for or already receiving Medicaid, Supplemental Nutrition Assistance Program, Supplemental Security Income Program, Federal Public Housing Assistance Program, Low-Income Home Energy Assistance Program, Temporary Assistance to Needy Families Program, the National School Lunch Program, Veteran's Pension and Survivors Benefit may qualify. Consumers may also qualify based on their income level.

All Lifeline subscribers must meet the terms and conditions of the Lifeline Eligibility Rules.

Ace Telephone Company of Michigan, Inc. local telephone service provided is described on our website.

The calling area is described in the MPSC No.1 tariff. The number of local minutes provided is unlimited.

Toll calls are billed at the carriers' standard rates.

On the following pages is the information regarding low-income assistance that is found on Company's website <a href="https://www.acentek.net">www.acentek.net</a>.

The Lifeline application form is available on the Company's website or will be mailed upon request.

Ace Telephone Company of Michigan, Inc. Tariff M.P.S.C. No. 1 (R)

8th Revised Sheet No. 15 Cancels 7th Revised Sheet No. 15

#### LOCAL TELEPHONE EXCHANGE SERVICE

#### LIFELINE SERVICE

#### A. DESCRIPTION

- Lifeline applies discounts to monthly recurring rates for qualifying residential customers. These discounts are applied to existing rates and charges for residential telephone service.
- In order to be eligible for Lifeline a residential customer's annual household income must be at or below 150% of the poverty level as determined by the United States Department of Health and Human Services and as approved by the State Treasurer, or the person must participate in one of the following programs:
  - Medicaid
  - Supplemental Nutrition Assistance Program (SNAP) Food Stamps

Supplemental Security Income (SSI) C.

- d.
- e.

- Supplemental Security Income (SSI)
  Federal Public Housing Assistance/Section 8
  Low Income Home Energy Assistance Program (LIHEAP)
  National School Lunch Program's free lunch program
  Temporary Assistance for Needy Families (TANF) a/k/a Family Independence Program
- Lifeline includes the services and functionalities enumerated in by the FCC, as follows; voice grade access to the public switched network or its functional equivalent; minutes of use for local service provided at no additional charge to end users; access to the emergency services provided by local government or other public safety organizations, such as 911 and enhanced 911, to the extent the local government in an eligible carrier's service area has implemented 911 or enhanced 911 systems; and toll limitation services.
- Other services can be provided with Lifeline at applicable rates and charges.
- 5. Proof of eligibility will be required for all initial Lifeline applicants and all Lifeline recipients will be required to re-certify every year.

#### **B. REGULATIONS**

- 1. Regulations specified elsewhere in the Company's tariffs apply to Lifeline.
- Lifeline is available only with residence services, excluding foreign exchange service. Lifeline is limited to a single subscription per household where household is defined to be any individual or group of individuals who are living together at the same address as one economic unit. For the purposes of this rule, an economic unit consists of all adult individuals contributing to and sharing in the income and expenses of a household.
- A miscellaneous service charge does not apply when Lifeline is added or discontinued to existing service when that is the only work being done.
- The Lifeline plan will apply after receipt and processing of a completed Lifeline application, including documentation indicating that the household income meets the eligibility standards established above.
- 5. Customers of Lifeline must notify the Company of any changes which would affect qualification. Recerification of eligibility will take place on an ongoing basis. When the customer is no longer eligible for Lifeline service, the Lifeline discount will be discontinued and regular tariff rates and charges will apply.
- 6. As a participant in Lifeline, customers are eligible to receive toll blocking service at no charge. This service will only be provided at the customer's request. Toll blocking service is defined as a central office service that restricts access to the network. Toll blocking is provided where facilities permit and will not allow 1+, 0+, 0-, 101XXXX, 900, or interzone calls to be completed. Toll blocking does not restrict local calls, calls to intraNPA directory assistance, telephone repair service, 911, or calls to 800 or 950 numbers.
- 7. Local service deposit requirements will be waived for customers who voluntarily receive Toll Blocking Service
- 8. Participants in Lifeline shall not be disconnected from local service for nonpayments of toll charges. In addition, the Company will not deny re-establishment of local service to customers who are eligible for Lifeline and have previously been disconnected for nonpayment of toll charges.

Issued: June 30, 2014 Effective: July 1, 2014

Issued under the authority of the PA 179 of 1991, Michigan Telecommunications Act, as amended.

Todd Roesler, CEO, Ace Telephone Company of Michigan, P.O. Box 69, Mesick, MI 49668, 507-896-3111, miinfo@acegroup.cc

Ace Telephone Company of Michigan, Inc. Tariff M.P.S.C. No. 1 (R) 3rd Revised Sheet No. 15.1 Cancels 2nd Revised Sheet No. 15.1

## LOCAL TELEPHONE EXCHANGE SERVICE LIFELINE SERVICE

#### C. MONTHLY RATES AND DISCOUNTS FOR LIFELINE CUSTOMERS

1. The discount on the monthly rate for residential exchange service for qualified Lifeline customers shall be \$9.25 from the Federal discount program plus \$2.00 from the State discount program for a total discount of \$11.25. Credits are applied to the end user's basic local exchange service. At no time shall the total Lifeline credit exceed the sum of the end user common line charge and the basic local exchange rate. The discount on the monthly rate for residential exchange service for qualified Lifeline customers 65 years of age or more shall be \$9.25 from the Federal discount program plus \$3.10 from the State discount program for a total discount of \$12.35. Credits are applied to the end user's basic local exchange service. At no time shall the total Lifeline credit exceed the sum of the end-user common line charge and the basic local exchange rate.

#### D. MONTHLY RATE FOR NON LIFELINE CUSTOMERS

A rate specified in MECA's Tariff M.P.S.C.No. 25 Part XVII. General applies per exchange access line to cover the costs of the Lifeline service, to the Telephone Company intrastate services as listed below:

- Business and Residence exchange services excluding Lifeline customers.
- PBX Trunk Services
- Centrex Services

The rate for business Centrex station lines will be computed based on the trunk Equivalence Table specified in the Company's Tariff M.P.S.C. No. 2.

Issued: June 30, 2014 Effective: July 1, 2014

Issued under the authority of the PA 179 of 1991, Michigan Telecommunications Act, as amended.

Todd Roesler, CEO, Ace Telephone Company of Michigan, P.O. Box 69, Mesick, MI 49668, 507-896-3111, miinfo@acegroup.cc



### For Sales & Support Call: 888,404,4940



Home

Residential

Business

Support

My Account

Company Info

Careers

Q

LIFELINE

# MICHIGAN > RESIDENTIAL > VOICE > LIFELINE

#### Low-income Telephone Assistance Plans

Residential

Voice

On a limited income? You can save with Lifeline services from AcenTek. This federal assistance program can help you save on your monthly local phone service.

Local Service

Services Provided

Long Distance

AcenTek provides single-party residential services. This includes access to:

Internet Video

AcenTek Assurance

2. local usage,

1. voice grade to the public switched network,

3. dual tone, multi-frequency signaling or its functional equivalent.

4. single-party service or its functional equivalent,

Business

Customer Support

5. emergency services, 6. operator services,

7. inter-exchange service.

8. directory assistance, and

9. toll limitation for qualifying low-income customers.

**Ufeline** 

Lifeline provides certain discounts on monthly service for qualified subscribers.

#### **How to Qualify**

Lifeline is available to qualifying customers in every U.S. state. Qualifications do vary by state, and states with their own programs have their own criteria. In states that rely solely on the federal program, the subscriber must participate in one of the following programs:

- · Federal Public Housing Assistance
- Food Stamps
- Low-Income Home Energy Assistance Program (LIHEAP)
- Income below 150% of the Federal Poverty Guidelines
- Medicaid
- National School Lunch's Free Lunch Program
- Supplemental Security Income (SSI)
- Temporary Assistance to Needy Families (TANF)

Please be aware that only one Lifeline discount may be received per household, even if the household has more than one telephone account, including landline or wireless phone service. Lifeline service is not transferable, and only eligible consumers may enroll in the program. Documentation of eligibility is required to enroll.

Click here to download the two-page certification form (PDF). Call Customer Service for more information.

Company

Services

Service Areas

Connect With Us

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lowa Michigan 888.404.4940



For Sales & Support Call: 888.404.4940



Home

Residential

Business

Support

My Account

Company Info

Q

#### LOW-INCOME INTERNET ASSISTANCE PLANS

MICHIGAN > RESIDENTIAL > INTERNET > LOW-INCOME INTERNET ASSISTANCE PLANS

#### Low-income Internet Assistance Plans

On a limited income? You can save with Lifeline services from AcenTek. This federal assistance program can help

Residential

Valce

Internet

Mesick

Allendale

Video

Customer Support

Business

AcenTek Assurance

you save on your monthly internet service Lifeline

Lifeline provides certain discounts on monthly service for qualified subscribers.

How to Qualify

Lifeline is available to qualifying customers in every U.S. state. The subscriber must participate in one of the

following programs:

Federal Public Housing Assistance

Supplement Nutrition Assistance Program (SNAP)

Income below 1503 of the Federal Poverty Guidelines

Medicald

Supplemental Security Income (SSI)

Veteran's Pension Survivors Benefit

Please be aware that only one Lifeline discount may be received per household, even if the household has more than one account. Lifeline service is not transferable, and only eligible consumers may enroll in the program.

Documentation of eligibility is required to enroll.

Click here to download the two-page certification form (PDF), Call Customer Service for more information.

Company

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## Michigan Lifeline Administration Service IMPORTANT INFORMATION

Please Review Before Submitting Application

For questions, please call 1-866-321-2323.

#### PROGRAM QUALIFICATION AND APPLICABLE DISCOUNTS

The Federal Communications Commission (FCC) made changes to Lifeline regulations that went into effect on December 2, 2016. As a result, customers may qualify for full or reduced benefits. The table below applies to customer who enroll in the Lifeline program after December 2, 2016 and to currently enrolled customers on their service initiation date when the FCC's "rolling recertification" process begins on July 1, 2017.

Federal/State Discount	MPSC Discount	<b>Total Discount</b>
\$9.25	\$2.00#	\$11.25 <sup>A</sup>
\$9.25	\$2.008	\$11.25 <sup>A</sup>
\$9.25	\$2.008	\$11.25^
\$9.25	\$2.00*	\$11.25^
\$9.25#	\$2.00*	\$11.25 4
\$9.25*	\$2.00*	\$11.25^
\$9.25*	\$2.00#	\$11.25^
\$9.25	\$0	\$9.25
\$9.25	\$0	\$9.25
	\$9.25 \$9.25 \$9.25 \$9.25 \$9.25\$ \$9.25\$ \$9.25\$	\$9.25 \$2.00 <sup>8</sup> \$9.25 \$2.00 <sup>8</sup> \$9.25 \$2.00 <sup>8</sup> \$9.25 \$2.00 <sup>8</sup> \$9.25 <sup>8</sup> \$2.00 <sup>8</sup> \$9.25 <sup>8</sup> \$2.00 <sup>8</sup> \$9.25 <sup>8</sup> \$2.00 <sup>8</sup> \$9.25 <sup>8</sup> \$2.00 <sup>8</sup> \$9.25 \$0

<sup>^</sup> Qualifying customers age 65 and over receive additional \$1.10 per month discount.

#### **INCOME INFORMATION AND GUIDELINES**

Customers that don't participate in any of the programs listed above can still qualify for discounts if their annual household income is at certain thresholds set by the federal and state governments. The tables below provide applicable discount amounts and current guidelines.

Income Level	Federal/State Discount	MPSC Discount	Total Discount
Annual Income At or Below 150% of Poverty	\$9.25	\$2.008	\$11.25^
Level			

A Qualifying customers age 65 and over receive additional \$1.10 per month discount.

Applies to voice-only service or voice/broadband bundled service; not applicable to broadband-only service.

Number in Household	150% of Federal Poverty Level
1	\$18,090
2	\$24,360
3	\$30,630
4	\$36,900
For each additional household member add	\$6,270

<sup>&</sup>lt;sup>8</sup> Applies to voice-only service or voice/broadband bundled service; not applicable to broadband-only service.

#### **BROADBAND AND VOICE SERVICES QUALIFY FOR DISCOUNTS**

Federal Lifeline Benefits are now available for qualifying broadband as well as voice services.

Broadband Service: Federal discounts are only available on certain services, State discounts do not apply.

- Broadband speeds must be 10 Mbps download and 1 Mbps upload or faster to qualify.
- Lifeline discounts on broadband include a transfer restriction (port freeze) for 12 months. This means that once Lifeline broadband discounts begin on your service you will be unable to obtain a Lifeline discount with another provider for 12 months if you switch your service. If you already have a Lifeline broadband discount with another provider, you cannot get a Lifeline discount from a new provider until 12 months after your current broadband Lifeline discounts began.

Voice Service and Bundled Voice-Broadband Service: Federal and state discounts are available to qualified participants.

- Lifeline discounts on voice include a transfer restriction (port freeze) for 60 days. This means you are unable to obtain the Lifeline discount on service with another provider for 60 days from the date that your current voice service Lifeline discounts began.
- If you purchase a bundle of voice and qualifying broadband, the federal discount will be applied to your qualifying bundle, and the 12-month benefit transfer restriction will apply. State discounts will apply to your voice services only.
- If you purchase voice service and a non-qualifying broadband service, you will receive both state and federal Lifeline discounts on your voice service.
- Certain exceptions to the transfer restrictions apply. See <u>www.usac.org/ls/change-my-company.aspx</u> for more information.

#### **General Condition Applicable to All Services:**

Total Lifeline discounts cannot exceed the price of service.

AcenTek	Deerfield Farmers' Telephone Co.	Southwest Michigan Communications
Allband Communications Coop.	Hiawatha Telephone Co.	Springport Telephone Co.
Baraga Telephone Co.	Kaleva Telephone Co.	TDS Telecom
Barry County Telephone Co.	Lennon Telephone Co.	Thumb Cellular
Blanchard Telephone Co.	Michigan Central Broadband Co.	Upper Peninsula Telephone Co.
Bloomingdale Communications	Midway Telephone Co.	Waldron Telephone Co.
Carr Telephone Co.	Ogden Communications	Westphalia Broadband, Inc.
CenturyLink	Ontonagon County Telephone Co.	Westphalia Telephone Co.
Chapin Telephone Co.	Pigeon Telephone Co.	Winn Telecom
Climax Telephone Co.	Sand Creek Telephone Co.	Winn Telephone Co.

#### LEGAL REQUIREMENTS

## PLEASE READ THE FOLLOWING IMPORTANT INFORMATION ABOUT THE LIFELINE PROGRAM BEFORE YOU APPLY:

- Lifeline is a non-transferable benefit and the subscriber may not transfer his or her benefit to any other person.
- The applicant must meet either income-based or program-based eligibility.
- Lifeline is a federal benefit and willfully making false or fraudulent statements to obtain the benefit is
  a violation of federal law and can result in fines, imprisonment, de-enrollment or being barred from
  the program.
- Only one Lifeline service is available per household. A household is defined for the purposes of the Lifeline program as any individual or group of individuals who live together at the same address and share income and expenses.
- A household is not permitted to receive Lifeline assistance from multiple telephone service providers. This includes both wireless and wireline providers.
- Violation of the one-per-household limitation constitutes a violation of the Federal Communications
  Commission's rules and will result in the subscriber's de-enrollment from the program and potentially
  prosecution by the US government.
- The applicants understands that if they are currently receiving Lifeline benefits from another carrier, by submitting this application, they agree to discontinue receiving another carrier's benefit and receive their one Lifeline benefit through the submission of this company's application.
- The applicant agrees to notify their telephone company within 30 days if s/he no longer meets
  the income-based or program-based eligibility criteria for receiving Lifeline support, if a
  household is receiving more than one Lifeline benefit, or another member of the household is
  receiving a Lifeline benefit, and may be subjected to penalties upon failure to do so.
- The applicant will notify their telephone company within 30 days of any changes to residential address.
- The applicant may be required to recertify their continued eligibility in the Lifeline program at any time and understands that failure to do so will result in termination of participation in the program.
- The applicant consents to Lifeline Administration Service providing their Lifeline service
  account information, including but not limited to, the applicant's name, residential address,
  phone number, date of birth, last 4 digits of social security number, the date on which
  Lifeline service was initiated/terminated, amount of Lifeline support provided, and the means of
  eligibility criteria through which the applicant qualified, to the Universal Service Administrative
  Company (USAC), USAC's agents and/or the National Lifeline Accountability Database (NLAD) to
  ensure the proper administration of the Lifeline program. The applicant understands that failure to
  do so will result in rejection of request for Lifeline services.
- The applicant understands that once s/he signs up for discounts with one provider, s/he cannot receive Lifeline benefits from another provider for a period of time. For voice-only services that qualify for Lifeline discounts, the applicant cannot move benefits to another provider for 60 days. For broadband services that qualify for Lifeline discounts, the applicant cannot move benefits to another provider for 12 months.

**REVISED 4/2017** 

## Michigan Lifeline Administration Service LIFELINE APPLICATION

#### TOLL FREE 1-866-321-2323

To apply for Lifeline Service, complete the application below and send it to:

Lifeline Administration Service, PO Box 11037, Lansing, Michigan 48901 or fax to 517-482-3548

	ATION INFORMATION (PLE			
Applicant's phone number:	Name of phone comp			
Date of Birth:	Last 4-digits of Socia	· · · · · · · · · · · · · · · · · · ·		
Last Name:	First Name:	M.I.:		
Street:	THIS HOUSE.	The state of the s		
You must provide a residential street address.	er FCC regulations, it can	not be a P.O. Box.		
City:		State: ZIP:		
This s my permanent address: Yes No T	This is my permanent address: Yes No This is a rural address with no postal route: Yes No			
Billing Address, City, State and Zip Code (if diffe	ent from Service Address	9		
There are multiple unique households (e.g. nurs	ng home assisted living f	acility) at my		
address, as defined in this program.	ng nome, assisted fiving is	YES NO		
The service I subscribe to is:	☐ Broadband Only	☐ Both Voice and Broadband		
PROGRA	M QUALIFICATION DETERM	MINATION		
To be eligible for Lifeline discounts, regulations below or to have an annual income that meets				
Step 1. Indicate if you, or the member of your				
programs. Include documentation of participat	on in the checked program	n with your completed application.		
Name of person enrolled in program:				
Federal Public Housing Assistance	☐ Veteran's Surv	ivor Pension Benefits		
Medicaid		ome Energy Assistance Program		
\$1.5 Permit from the control of the		ol Lunch Program		
Supplemental Nutrition Assistance Program				
Supplemental Security Income	L Temporary Ass	istance for Needy Families		
☐ Veteran's Pension Benefits				
Step 2. If you do not participate in any of the annual household income. Complete this section document total gross household income based Worksheet.	by providing the information			
TOTAL MONTHLY GROSS INCOME: \$	NUMBER OF HO	DUSEHOLD MEMBERS:		
Prior year's state or federal tax return.	Current Annual	Gross Income Statement from Employer		
Social Security statement of benefits		or other official document containing income any 3 consecutive months within last 12 months		
Retirement/pension statement of benefits	☐ Veterans Admir	nistration statement of benefits		
Unemployment/Worker's Compensation Statement of Benefits	Divorce decree information	or child support document containing income		

## APPLICANT ACKNOWLEDGEMENTS

## PLEASE READ AND INITIAL EACH OF THE FOLLOWING STATEMENTS TO INDICATE THAT YOU UNDERSTAND AND AGREE:

7.1.2 7.3.12.1	
I understand and consent to Lifeline Administration Service providing my Lifeline service including but not limited to, my name, residential address, phone number, date of birt security number, the date on which my Lifeline service was initiated/terminated, the a provided, and the means through which I qualified for Lifeline, to the Universal Service (USAC), USAC's agents and/or the National Lifeline Accountability Database to ensure Lifeline program. I understand that if I fail to provide this consent, Lifeline Administra Lifeline service.	h, the last 4 digits of my social mount of Lifeline support Administrative Company the proper administration of the
I certify that I meet either the income-based eligibility criteria in Step 1 or the program 2 above.	n-based eligibility criteria in Step
Lifeline is a non-transferable benefit and the subscriber may not transfer his or her be	nefit to any other person.
Lifeline is a federal benefit and willfully making false or fraudulent statements to obta federal law and can result in fines, imprisonment, de-enrollment or being barred from	
Lifeline support is only available for a single phone line at my principal residence and I knowledge that no one else in my household is receiving Lifeline discounts. (A "househor group of individuals who live together at the same address and share income and expense of the same address.)	nold" is defined as any individual
Violation of the one-per-household limitation constitutes a violation of the Federal Co and will result in the subscriber's de-enrollment from the program and potentially pro	
——I understand that if I am identified as receiving more than one Lifeline benefit, all tele may be notified so that I may select one service and be de-enrolled from the other(s).	phone service providers involved
——I will notify my telephone company within 30 days if I no longer meet the income-base criteria for receiving Lifeline support, If I am receiving more than one Lifeline benefit, is receiving a Lifeline benefit, and I may be subject to penalties if I fail to do so.	
——I will notify my telephone company within 30 days of any changes to my residential ad	dress.
I may be required to cert fy my continued eligibility for Lifeline at any time and I know termination of my participation in the program.	failure to do so will result in
I understand that once I sign up for discounts with one provider, I cannot receive Lifely provider for a period of time. For voice-only services that qualify for Lifeline discounts another provider for 60 days. For broadband services that qualify for Lifeline discounts another provider for 12 months.	, I cannot move benefits to
APPLICANT SIGNATURE	
I certify, under penalty of perjury, that the information provided in this application documentation is true and complete.	on and supporting
Signature:	Data
_	Date:
	REVISED 4/2017

#### Michigan Lifeline Administration Service Lifeline Household Worksheet

Lifeline Program support is a federal benefit that provides a monthly discount on home phone (i.e., landline phone) or cell phone service. Only one Lifeline Program-supported service per household is allowed under Federal law. Answer the questions on the following page to determine if there is more than one household living at your address, and if your household already receives a Lifeline Program benefit.

Providing false information on this form may result in losing your Lifeline Program-supported service and possible criminal penalties.

Your household is everyone who lives together at your address and contributes to, or shares in, the income and expenses of the household. Household expenses include food, health care expenses, and the cost of renting or paying a mortgage on your place of residence and utilities. Income includes salary, public assistance benefits, social security payments, pensions, unemployment compensation, veteran's benefits, inheritances, alimony, child support payments, worker's compensation benefits, gifts, and lottery winnings.

Members of a household are not permitted to receive more than one Lifeline Program-supported service. You are receiving a copy of this form because records indicate that more than one person at this address is receiving a Lifeline Program benefit. Each person at this address who receives a Lifeline Program benefit and has not yet completed and returned a household worksheet will receive a copy of this form, pre-populated with his/her name, address and telephone number.

If you DO NOT share income and expenses with the other adult(s) living at this address who receive Lifeline Program benefits, or there are no other adult(s) living at this address receiving Lifeline Program benefits, you MUST STILL sign this form to continue to receive your Lifeline Program benefit. If you fail to do so, you will be de-enrolled from your Lifeline Program benefit.

If you live with another adult(s) who shares income and expenses with you and who has a Lifeline Program benefit on his or her phone service, your household is receiving more than one Lifeline Program benefit. If so, you MUST take the following steps: (1) consult with the other adult(s) in your household currently receiving a Lifeline Program benefit and decide who will keep the Lifeline Program benefit for the household; and (2) the person who will keep the Lifeline Program benefit, AND ONLY THAT PERSON will fill out the form IN FULL and return it to his or her telephone service provider within 30 of days of the date of this communication. The telephone number listed on this form will be the number which will retain the Lifeline Program benefit.

If the PERSON IN YOUR HOUSEHOLD WHO WISHES TO KEEP THE LIFELINE PROGRAM BENEFIT FOR THE ENTIRE HOUSEHOLD HAS ALREADY PROVIDED a household worksheet to their service provider, then <u>NO FURTHER ACTION IS NECESSARY</u>. (The person named below does not need to sign and send this form to their Lifeline provider).

After 30 days of the date of this letter, all other subscribers at this address below who have not completed a household worksheet will NO LONGER have a Lifeline Program benefit.

Name			Telephone Num	ber		
Address						
	Street	Apt.	City	State	Zip	

	the first of the second se
No. Please answer question 2 below.	Yes. If YOU are the person who will keep the Lifeline benefit, check OPTION B at the bottom and sign this Form. If you are not keeping your Lifeline benefit, DO NOT submit this form.
2. Does another adult (age 18 or older, or em Lifeline Program-discounted phone service?	andipated minor) live with you AND have a
No. Please check OPTION A below and SIGN THIS FORM.	YES. Please answer question 3 below.
	7
3. Do you share expenses for bills, food, or ot the person in question #2?	her living expenses <u>AND</u> share income with
No. Please check OPTION C below and SIGN	Yes. If YOU are the person who will keep the Lifeline Program benefit, check OPTION B at the
THIS FORM.	bottom and sign this form. If you are not keeping your Lifeline benefit, DO NOT submit this form.
ease check the box below for the one that applies PTION A. [ ] No one in my household, other that enefit and therefore I may continue to receive a Lif PTION B. [ ] There are others in my household the origining this form, I will be the only member of thi	bottom and sign this form. If you are not keeping your Lifeline benefit, DO NOT submit this form.  to you: an myself, is currently receiving a Lifeline Program feline Program benefit. at are currently receiving a Lifeline Program benefit
ease check the box below for the one that applies PTION A. [ ] No one in my household, other that applies enefit and therefore I may continue to receive a Life PTION B. [ ] There are others in my household the signing this form, I will be the only member of this ogram benefit. PTION C. [ ] There are other adults who reside ogram benefit but do not share income and expense.	bottom and sign this form. If you are not keeping your Lifeline benefit, DO NOT submit this form.  to you: an myself, is currently receiving a Lifeline Program feline Program benefit. at are currently receiving a Lifeline Program benefit is household to continue to receive a Lifeline at the above listed address who receive a Lifeline ses with me, therefore since I am the only member
enefit and therefore I may continue to receive a Liferion B. [ ] There are others in my household the signing this form, I will be the only member of this ogram benefit.  PTION C. [ ] There are other adults who reside to sogram benefit but do not share income and expensive my household receiving a Lifeline Program benefit	to you:  In myself, is currently receiving a Lifeline Program benefit.  In at are currently receiving a Lifeline Program benefit is household to continue to receive a Lifeline at the above listed address who receive a Lifeline ses with me, therefore since I am the only member, I may continue to receive that benefit.  I understand that violating the one-per-household Commission's rules and I may lose my Lifeline

Study Area Name: Ace Telephone Company of Michigan, Inc

Study Area Code: 310704, 310777, 310669, 310692

State: Michigan

Form 481 Line Number 3010

Milestone Certification (47 CFR §54.313(f)(1)(i))

Ace Telephone Association hereby certifies that throughout 2016, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream / 1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas, and that requests for such service are met within a reasonable amount of time. If a request for broadband service at actual speeds of at least 10 Mbps downstream / 1 Mbps upstream is unreasonable, and offering broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream is reasonable, the company offers broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream.

Study Area Name: Ace Telephone Company of Michigan, Inc

SAC: 310704, 310777, 310669, 310692

State: Michigan

Form 481 Line No. 3026 - Rate of Return Financial Data

DOCUMENT REDACTED IN ITS ENTIRETY